Goal of the work: foal of our work is study of prevalence of food allergies and risk factors in children’s population in selected populations of Tbilisi, Barumi and Kutaisi-Tskaltubo.

Materials and methods: Studied population includes 2655 children (2010–2013) from 1-month to 14-year age. 1359 of them were girls and 1296 – boys (I group: children from 1 month to 6 years and II group – from 6 years to 14 years). At the first stage of epidemiological study, screening of 2665 children was conducted by means of the initial questionnaire filled in directly at a time of interviewing of the parents. Identification of the factors of causal significance was provided based on anamnesis data, comparison of general serum and specific IgE and in vivo allergologic diagnostics (prick-tests). Obtained data were statistically processed by means of SPSS/V12.5 software (Statistical Package for Social Sciences).

Results: Epidemiological studies showed that prevalence of food allergies in children’s population (7.5% - Tbilisi; 6.2% - Kutaisi-Tskaltubo; 4.3% - Adjara) was 18.04%. Average total IgE, in both cases, was 3–5 times higher than normal value and no statistically reliable difference between the groups was found (p > 0.05). Only 3.9% of children with food allergies had IgE within normal limits. High frequency of late diagnostics was established (p < 0.001).

Conclusion: Thus, according to the obtained data, share of the manageable risk factors is high and this could provide basis for development of targeted and effective prevention measures for the children’s population. Food allergy is complex and versatile process requiring further study.

PO-0992 SOME BONE MARKERS AND SERUM VITAMIN D IN EPILEPTIC CHILDREN ON EPILEPTIC DRUGS

E. A. El Behairy, H. Elshafie, L. S. Sherif, H. Helwa. Child Health Department, National Research Center, Cairo, Egypt; Pediatric Department, Cairo University, Cairo, Egypt; Child Health Department, National Research Center, Cairo, Egypt; Immunogenetics, National Research Center, Cairo, Egypt

Aim: to estimate serum vitamin D level and some biochemical markers of bone turnover in Egyptian children with epilepsy on antiepileptic drugs.

Methods: Case control cross sectional study was conducted on thirty children with epilepsy (19 males, and 11 females) on anti-convulsant therapy, divided into two subgroups according to mode of therapy; 15 under polytherapy (group I) 15 under monotherapy (group II). Twenty apparently healthy children were recruited as control group.

Results: Epileptic patients on polytherapy had highly significant low serum 25-hydroxy vitamin D level compared to those on monotherapy (p < 0.001) with highly significant differences between patients versus controls (p < 0.001). Over two thirds of patients 80% (24/30) had low serum 25-OHD levels; 26.67% (8/30) had 25-hydroxyl vitamin D levels less than 20 ng/ml, and 53.33% (16/30) patients had 25-hydroxy vitamin D levels between 21 and less than 32 ng/ml. Differences between the cut-off categories were highly statistically significant for patients versus controls (p < 0.001), and among the polytherapy versus monotherapy subgroups (p < 0.001). Patients on polytherapy showed highly significant lower level of 25-hydroxyvitamin D compared to those on valproate alone, or carbamazepine alone (F=32.345, p < 0.001) by ANOVA.

Conclusion: Results revealed high risk of vitamin D deficiency in epileptic children on antiepileptic drugs especially those under long term polytherapy. Alterations of biochemical markers of bone formation suggest an accelerated skeletal turnover. Routine monitoring of serum 25-hydroxy vitamin D is recommended.

PO-0993 EPIEDEMIology OF DRUG OVERDOSE/POISONING IN PAEDIATRIC POPULATION IN A SINGLE CENTRE OVER 2 YEAR PERIOD

D. Rallis, A. Stefanopolous, A. Petropolous, V. Karakosta, K. Angelopoulos, E. Botsa, I. Orfanou. Paediatrics, Aghia Sophia Children’s Hospital, Athens, Greece

Background and aim: Intentional ingestion of toxic substances (cigarette), drug overdose and mucosal injuries due to corrosive liquid (house cleaners, batteries) remains common paediatric problem, with estimated annual admissions 94/100,000 population.

Methods: We retrospectively recorded all patients admitted due to drug overdose-toxic/corrosive substance ingestion to the 3rd Department of First Paediatrics, of the National University of Athens Greece, from 3/2012–3/2014.

Results: In total 190 patients were recorded, with mean age 41 ± 39 months. The study population was further divided into 4 age-groups: babies (0–12 months), toddlers (1–3 years), prepubertal children (4–8 years) and teenagers (≥9 years). Males were predominant in younger age (68%, 57% and 62% in group 1, 2 and 3 respectively), while females were predominant during pubertal age (75%), (p < 0.05). Babies’ main hospitalising reason was cigarette ingestion (55%). Toddlers were equally admitted due to cigarette (34%), corrosive liquid ingestion (22%) or drug overdose (33%). Drug overdose was mainly recorded in prepubertal children (60%), while teenagers mainly suffered by drug (45%) or alcohol overdose (40%), (p < 0.001). Regarding the duration of the hospitalisation, younger patients (groups 1, 2 and 3) discharged in <24 h (91%, 80% and 73% respectively), 55% of teenagers however had to stay for >24 h (p < 0.001).

No differences were recorded regarding the socioeconomic/educational status of the families, notable is however that 27% of the patients were self-discharged, unlike doctors’ suggestions.

Conclusion: Young males with unintentional cigarette ingestion/drug overdose, or teenage females with alcohol/drug overdose comprise the profile of our typical patient. Despite the initial family stress, 25% of the patients are shortly after admission self-discharged.