Objective This study is designed to evaluate serum IL-18 among other T helper (Th) cytokines IL-4, IL-10, IL-12, interferon-γ (IFN-γ), tumour necrosis factor – α (TNF –α) and immunoglobulin E (Ig E), in addition to vitamins E and C in children and adolescents with acute and chronic AD.

Materials and subjects Sixty AD patients were classified into two main groups; children (acute) and adolescents (chronic) AD of thirty each. In addition, two corresponding healthy normal control groups of thirty each were considered. Serum IL-4, IL-12, IL-18, IFN-γ and IgE were estimated by ELISA.

Results IL-12, IL-18 and IFN-γ levels were 2-4 folds more in chronic AD compared to normal subjects. While, IL-18 showed significant higher mean value in chronic than acute AD patients. Although, TNF –α showed, significant increase one fold and half in acute than chronic AD. Moreover, vitamins C and E showed significant decrease in both cases with severe reduction in chronic than acute AD patients.

Conclusion ILs, IFN-γ, TNF- α and serum IgE have a pivotal role in AD. IL-18 measurement is a valuable tool for assessment of the difference in age related – disease severity. Intensive reduction in both vitamins C and E in chronic AD patients than acute one.

Conclusions Improved access to knowledge about early diagnosis and disease management for primary and specialist paediatric health care professionals, can bring the EAP experience and expertise to bear on current European and international research.

Background and aims UN Convention on the Rights of the Child (UNCRC) is an essential part of child health promoting policies. Several studies were carried out on the implementation of UNCRC in secondary and tertiary health care levels but not in primary paediatric care (PPC) settings. PPC model heterogeneity in Europe is related to socioeconomic/demographic factors, paediatric education/training and child health care policies. PPC is either provided by paediatricians or family doctors/GPs.

The study aim was to assess under a social paediatrics perspective UNCRC knowledge/implementation in European PPC settings.

Methods As to profile UNCRC in PPC, a questionnaire (Q1) was designed including 23 specific questions regarding rights of protection, provision and participation. The questionnaire was launched as a "monkey survey" to individual paediatricians practicing in PPC settings through the Council of PPC European national societies participating in the study. Specific country data (Excel table) and total merge data were analysed using SPSS tool.

Results 1342 responses received from 10 participating European PPC societies: -Not enough knowledge: 52%–71% -Implementation:Partly implemented 30%–67%, fully implemented 33–66% -Equal access to health care: Provided 84%–99.5% -Right to information: Available 90%

Conclusions The knowledge/implementation of UNCRC in PPC varies significantly among European countries. Deep gaps on UNCRC knowledge were found. Equal access to health care is provided in urban areas. UNCRC should be included in paediatric education as well as addressed in PPC planning policies. Further research on UNCRC in various European PPC models/health care providers is needed (Study Phase 2).