HAEMOPHILUS INFLUENZAE TYPE B CONJUGATE VACCINE (PRP-D) PROTECTS FROM BACTEREMIC DISEASES IN INFANCY

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Haemophilus influenzae type b (Hib) is the most important cause of bacteremic infections in young children. The annual incidence of invasive infections caused by Hib is 53/100,000 children aged less than 5 years; about 200 cases (meningitis, epiglottitis, febrile bacteremia, etc) are seen yearly in Finland. The fatality rate has been 3% and permanent sequelae remain in at least 15% of the cases. An open trial with a new conjugate vaccine PRP-D (Hib capsular polysaccharide coupled to diptheria toxoid) was started in Finland in January 1986. Up to August 1987, appr. 50,000 children were enrolled in the vaccine group, and another 50,000 children were enrolled in February 1987 there have been 3 cases of bacteremic Hib disease in the vaccination group and 30 cases in the control group between ages 7 and 14 months. A fourth dose of PRP-D was given to the vaccination group at 14 months. After this booster dose there have been no cases, but 11 cases in the nonvaccinated control group between the ages of 14 and 24 months. The protective efficacy of PRP-D vaccine has thus been 93%. No significant adverse effects have been observed.

URINARY TRACT INFECTION DURING THE FIRST YEAR OF

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LIFE.
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The clinical and laboratory findings of urinary tract infections in 190 infants (91 boys and 99 girls) aged 15 days to 12 months are presented. Male infants accounted for the majority of UTI in the first month of life. Thereafter both sexes were equally affected. Fever was the most prominent clinical feature (79%) followed by failure to gain weight (38%), anorexia (37%), vomiting (29%) and diarrhea (27%). E coli was the predominant organism (68.4%) followed by Proteus sp. (19.5%). Full blood count and urinalysis were normal in one third of the infants. Roentgenographic abnormalities were detected in 54.5% of girls and 50.6 of boys. Vesicoureteral reflux was the most common anomaly found (40.9%).