	Admiss.	5 days	10 days
CRP	+	+	-
ESR	+	+	+
WBC	+	+	+/-
PCT	+	+	-

[Children with bronchopneumonia]

	Admiss.	5 days	10 days
CRP	3	5	0
ESR	2	4	3
WBC	2	9	3
PCT	2	4	0

[Children with bronchiolitis]

Key words Procalcitonin, C reactive protein, lower respiratory infection

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EVALUATION OF MENINGITIS COMPLICATIONS IN CHILDREN ADMITTED EMERGENCY ROOM OF GHAEM&IMAM REZA HOSPITAL.MASHAD IRAN

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Introduction: Meningitis is one of the most important emergencies in children. During the treatment of meningitis, acute complications such as hyponatremia subdural effusions, seizure and a prolonged fever may occur and cause irreparable sequels. Knowing these complications and there proper treatment can improve the prognosis of disease, therefore we decided to evaluate meningitis acute complications in study in one year period.

Method: In this study 108 suspected meningitis cases in children who were admitted in children department of Imam Reza and Ghaem Hospitals were investigated. The data were collected using questionnaire and analyzed using SPSS.

Materials and results: Among the patients who were the suspected of meningitis the number of male patients(62%) was more than female patients(38%).Frequency of the disease in 3 to24 months old children was more than others(41%). The patients mostly presented with fever and seizure, Among the patients who were studied 57 of them were diagnosed as CNS infection an among them only 8 cases had positive cultures.

The most common organism were Hemophilus influenza(28%). Hyponatremia (31 cases) is the most common complication followed by seizure(16 cases) and prolonged fever (one case) in patients with CNS infection.28% of patients with bacterial meningitis had subdural effusions in CTScan.

The mean of HB value was sufficiently lower in patients with bacterial meningitis in comparison with patients with viral meningo encephalitis.

Conclusion: During the treatment of meningitis hyponatremia and seizure after treatment and subdural effusions should be considered.

Keywords: Meningitis, complication, children

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PANDEMIC INFLUENZA A (H1N1) INFECTION IN PEDIATRIC POPULATION: A MULTICENTRIC STUDY IN NORTH-EASTERN ITALY

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The rapid increase of new cases of pandemic influenza A (H1N1) in Italy in the autumn 2009 was alarming and limited data were available on disease characteristics and outcomes of children who required hospital admission.

Objective: To describe clinical characteristics, treatment and outcome of children hospitalized for H1N1 pandemic influenza in the nineteen Pediatric Units of the Veneto Region (North-Eastern Italy, ~800.000 inhabitants 0-17 years).

Methods: Retrospective study including children consecutively admitted from November 2009 to February 2010 for H1N1 influenza confirmed on reverse-transcriptase polymerase-chain-reaction assay.

Results: Clinical, laboratory, and radiographic data of 200 children were reviewed. The median age was 4.15 years (range 0-17.5). At least one underlying medical condition was found in 43.5% of patients. Fever and cough were the most frequent symptoms (92.5% and 64.5% respectively). In 81% of patients chest radiograph findings were consistent with pneumonia. Eleven (5.5 %) were admitted to an intensive care unit (ICU) and 5 (2.5%) required