Since secnidazole had milder side effects and was more effective in relation to metronidazole and it can be used in single dose it can be concluded as a better drug than metronidazole for treatment of giardiasis in childrens.

895

6 MONTHS FOLLOW UP OF HIV-1 INFECTED CHILDREN WITHOUT TREATMENT: USE OF CD4/CD8 RATIO AS A MARKER OF DISEASE PROGRESSION

I. Shah¹, S. Parikh²

¹B.J. Wadia Hospital for Children, ²GSMC and KEM Hospital, Mumbai, India

Background: In this study we follow up children with perinatal HIV-1 infection who are not on antiretroviral therapy (ART). It aims to assess the relevance of laboratory markers of disease progression with immunological status in pediatric population at our tertiary hospital in Mumbai. The significance of CD4/CD8 ratio in predicting disease progression is analysed.

Methods: A retrospective analytical study on all HIV-1 infected children who presented to our hospital in the year 2006-2007 and could not afford ART was carried out.

Results: CD4/CD8 ratio was found to predict the worsening or improvement/no change of immune category of children within 6 months (p value=0.030). Those with an improvement or no change in immune category had a mean initial ratio of 0.62 ± 0.30 and those with a worsening of immune category had a mean initial CD4/CD8 ratio of 0.37 ± 0.25 . Thus children with a higher ratio showed better chances of improvement or maintain their immune category.

Conclusion: CD4/CD8 ratio may be used with caution as an adjuvant marker to CD4 count and CD4% to establish need of initiating antiretroviral therapy and for monitoring the immunological status and disease progression in HIV-1 infected children.

896

ANTIMICROBIAL RESISTANCE PATTERNS OF SHIGELLA ISOLATES IN IRANIAN CHILDREN

A. Mahyar¹, S. Mahyar²

¹Pediatrics, ²Pharmacy, Qazvin University of Medical Sciences, Qazvin, Iran

Background: Shigellosis is a major health problem in developing countries, causing more than 90 million episodes in Asia annually and sometimes results in death.

Objective: Evaluation of resistance patterns of Shigella isolates from children with acute diarrhea to commonly used antimicrobials.

Materials and methods: This prospective cross sectional study has been conducted on 71 hospitalized children affected with diarrhea with diagnosis of **Shigellosis** in Qazvin children hospital , Qazvin ,Iran in 2008. Stool specimens were received from study subjects and cultured. Isolates were confirmed by biochemical and serological tests. The isolates were tested for antimicrobial susceptibility by the disc diffusion method. Data was analyzed by using statistical methods.

Results: From a total of 71 children with **Shigellosis** 38(53.5%) were male and 33(46.5%) females. Mean age was 4.2 ± 1.8 years. The most common Shigella isolates were sonnei 58(81.6%), boydii 7(9.9%), dysenteriae 3 (4.2%) and flexneri 3 (4.2%). Resistance to antibiotics in isolates were: co-trimoxazole 54(76%), ampicillin 35(49.2%), nalidixic acid 32(45%),ceftriaxone23(32.3%), Cefotaxime 15(21.1%) and ciprofloxacin 4(6.4%).

Conclusion: High rate resistance of Shigella to multiple drugs such as nalidixic acid and third generation cephalosporins (ceftriaxone and cefotaxime) is worried. Continuous monitoring of resistance patterns among Shigella isolates is recommended.

Keywords: Antimicrobial Resistanse, Shigella, Children