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SLEEP PATTERNS IN A PORTUGUESE ADOLESCENT POPULATION

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Background and aims: Everybody recognizes the importance of good sleep habits, but this is not an easy issue to get the agreement of adolescents. The schedules are not the best and even the quality of sleep can be poor, with the consequences during daytime performances.

Methods: An anonymous questionnaire was applied to 705 high school students of Viana do Castelo, Portugal.

Results: The median age is 16 years and 54% are females. At week, the median age that they go to bed is 23:00 and on the weekend is 1:00. They wake up at 7:20 (median) at the week and on the weekend at 10:00. Fifty-four percent recognize they don't sleep enough time at week, mainly because of television (35%), but 69% think they sleep enough on the weekend. Fifty-three percent recognize that their school performance could be better if they slept more and only 22% feel rarely or never sleepy during the day. Twenty-eight percent admit to suffer from insomnia. Fourteen percent admit to go out at night more than once a week and 57% more than once per weekend. Sixty percent have a television on the bedroom and 48% a computer. Only 7% sleep the SESTA at week and 11% on the weekend.

Conclusions: We conclude that adolescents' sleeping patterns are not the healthier ones and it can influence their school performance, as they do admit it. The quality of the sleep can even be worsened by the presence of the television and the computer in the bedroom.

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RADIOFREQUENCY ABLATION (RFA) - TREATMENT OF CHOICE FOR OSTEIOD OSTEOMA

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Background and aims: Osteoid osteoma is a relatively common benign bone tumor. Until recently, treatment has been surgical excision of the nidus. In 1992 Radiofrequency ablation (RFA) was first reported as a new method of treatment. Our aim is to evaluate the efficacy and safety of Computed Tomography (CT) guided RFA as a minimally invasive therapy for osteoid osteoma.

Methods: 17 patients aged 11-18 years were treated with RFA sessions. Osteoid osteomas were located in femoral body (5), tibial body (3), inferior articular surface of tibia (3), superior articular surface of tibia (2), sacrum (2), cotyle (1) and vertebral arc (1). RFA was performed under sedation. After localization of the nidus, with 3mm CT slices osseous access was achieved with a 2 mm coaxial drill system, through which an expandable RF electrode with 7 arrays was advanced. RF energy was applied for 6-10 min at 80-110C. A technically successful ablation was regarded when electrode was placed within the center of the nidus and the desired temperature was achieved. Clinical success was evaluated with the Brief Pain Inventory (BPI) which was calculated before and after (1, 4 and 12 months) the treatment.

Results: Technical success was 100%. Clinical success was achieved in 94, 1% of the lesions (16/17). One patient had recurrence of pain at 5 months and a second RFA was performed successfully. No immediate or delayed complication was observed.

Conclusions: CT-guided percutaneous RFA is a safe, efficient, cost effective and minimally invasive method for treatment of osteoid osteomas.