speech and language delay and 106 (31%) had a diagnosis on the autistic spectrum(ASD). 12 (3.5%) had behavioural problems and 16 (4.68%) children had a primary diagnosis of intellectual disability. 79 (23.1%) children had cognitive impairment. 47 (13.7%) are awaiting completion of assessment. 22 (40.1%) of the 54 African children, and 42 (41.25%) of the total ethnic minority cohort had an ASD diagnosis. 72(33%) of the Irish children had an ASD diagnosis.

Conclusions: This clinic has a disproportionate number of referrals from ethnic minority backgrounds. The high number of referrals of African children is interesting, especially considering that the African community comprises 0.85% of the Irish population, and that 5.6% of births in 2004 were to African mothers. Children presenting from ethnic minority backgrounds were more likely to have an ASD diagnosis than the Irish children, a feature which requires investigation.

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TRANSANAL IRRIGATION IS A VALID AND SAFE APPROACH FOR NEUROGENIC CONSTIPATION IN MYELOMENINGOCELE CHILDREN

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The aim of this study is to investigate if transanal irrigation is a valid approach for neurogenic constipation in children with myelomeningocele.

100 patients (60 boys and 40 girls; aged 8-20 y) with neurogenic bowel dysfunction were treated with transanal irrigation for six months. A questionnaire on the effects on bowel disturbances, self-management and quality of life related to neurogenic constipation was completed before and after the trial.

At the end of the trial 66% (66/100) of patients referred a successful in constipation and 70% (70/100) regarding faecal incontinence. Questionnaire scores before and at termination of the study showed that neurogenic bowel dysfunction total score (range 0-47, 47= severe bowel dysfunction) was 17.5 (5.2) versus 8.5 (4.3) ($P = .001$), frequency of fecal incontinence (range is 0-13, 13= daily) was 5.5 (1.2) versus 1.3 (1.7) ($P = .01$) and degree of general satisfaction (range 0-10, 10= high satisfaction) was 3.0 (2.4) versus 7.7 (1.5) ($P = .001$).

We observed a moderate reduction of number of urinary tract infections during treatment particularly regarding E.Coli infections: 24 total urinary tract infections (18 by E. Coli) in 6 months before versus 12 (9) during treatment ($P < 0.01$). No changing regarding urodynamic parameters were found. No severe adverse effects were reported and treatment was been well tolerated by younger children too.

Transanal irrigation is a valid approach for managing of neurogenic constipation in fact it improves bowel disturbances, quality of life and seems to reduce urinary tract infections.

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IMPROVING CLINICAL CARE BY ROLLING AUDIT IN A DISTRICT GENERAL HOSPITAL EPILEPSY CLINIC

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Aims: Dedicated paediatric epilepsy clinics are increasingly recognised as good practice within DGH's. We aimed to gather demographics and audit current practice against 2004 NICE guidelines in the context of a data set encouraging clinicians to use the ILAE approach to paediatric epilepsy, forming the basis for a clinically relevant database.

Method: Proforma were completed for all children attending the epilepsy clinic. Demographics and clinical outcomes were measured and audited against NICE guidelines.

Results: 110 children attended clinic of which 83 had epilepsy. 55% were male. 18% presented < 2 years old. Common seizure types were generalised tonic clonic, absence and focal motor. Overall epilepsies were classified as generalised (37%), focal (48%) and encephalopathic (14%). A specific epilepsy syndrome was identified in 86%. Common epilepsy syndromes included symptomatic focal epilepsy, generalised tonic clonic and BECTS. Symptomatic or probably symptomatic aetiology was identified in generalised (29%), focal (68%) and encephalopathic epilepsy (100%). Associated co-morbidities were common (60%). Significant learning difficulties occurred in generalised (19%), focal (25%) and encephalopathic epilepsy (91%). Paediatric neurology was involved in 46%. AED choice was appropriate in 99%. Monotherapy was achieved in 65% requiring AEDs and 14% were on > 2 AEDs. EEG was performed in 100%, MRI in