80% and CT in 47%. Seizures were controlled in 36%, acceptable in 51% and uncontrolled in 15%.

Conclusions: An active database for paediatric epilepsy can provide valuable demographic, clinical and audit data. This improves quality of care and provides opportunities for outcome comparators, targeted audit and future research.

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INTELLECTUAL CAPABILITIES AT CHILDREN WITH EPILEPSY

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Background and aims: To evaluate intellectual potential at children with epilepsy, considering if the intellectual functioning of these children is worsening ; the development of the ilness and the basic factors which influence development and intelligence deficit.

Methods: Files of 52 children, pacients in our institute, were reviewed with information about their sex, age, pediatric and neurologic status, neuropsychological evaluation of intellectual fonctioning, EEG results and NMR of the brain, and the therapy that was used and the effect it caused.

Results: 25 girls and 27 boys, at the age of 1 to 18 years. The following results were found: normal intellectual development at 27 children, borderline intellectual fonctioning at 6 children, mild mental retardation at 15 children, moderate intellectual retardation at 4 children and neurological problems at 8 children; 39 children are on monotherapy, 13 children on polytherapy. The most used antiepileptics are valproats and carbamazepine, but the new generation of antiepileptics are frequently used too. The farmacoresistant epilepsy is verified in 11 children, and morphological changes of NMR of the brain are visualised at 16 children.

Conclusions: Most of the children with epilepsy show normal intellectual development, with tendency to decrease with the duration of the illness. Intellectual disability is more often found at children with an early beginning of the attacks, initially lower intellectual potential and lower control of attacks. Children with normal NMR of the brain most ofteh have a normal intelligence. Higher intellectual deficit is found at children with farmacoresistant epilepsy.

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HELICOBACTER PYLORI INFECTION AND HEADACHE IN CHILDREN AND ADOLESCENTS

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Object of study: Headache and migraine is a common problem nowadays for an increasing number of children and adolescents. At the last few years, there are some references in the literature about the correlation in adults between headache and Helicobacter Pylori infection. The aim of the study was the investigation of the correlation between headache and Helicobacter Pylori infection in children.

Method: A total number of 65 children and adolescents aged 7,5 to 17 years were enrolled. All of them suffered from headache or migraine (international criteria 2001) and they were tested firstly using urea breath test(UBT). From the children and adolescents tested with UBT, 17 of them were found positive for Helicobacter Pylori infection. These 17 children and adolescents were investigated with an upper GI endoscopy and received the proper therapy based on Helicobacter Pylori infected tissue culture and antibiogram.

Results: After 4 months of observation, starting 1 month after the end of the anti-helicobacter infection therapy, all 17 children and adolescents were free of headache and migraine symptoms.

Conclusion: Although these are preliminary findings, we can assume that Helicobacter Pylori infection maybe plays a role in the pathogenesis and phenotype expression of headache and migraine in children and adolescents.

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CHANGES OF SERUM FERRITIN AND BLOOD LEAD LEVELS IN CHILDREN WITH ATTENTION DIFICIT HYPERACTIVITY DISORDER

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Objective: To explore the changes of serum ferritin(SF), blood lead(BP) and hemoglobin in children with attention deficit hyperactivity disorder (ADHD).