

## COMPARISON OF CLINICAL AND PARACLINICAL FINDINGS IN URINARY TRACT INFECTION OF NEONATES AND INFANTS

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**Background and aims:** Urinary tract infection (UTI) included 0/7% of outpatient and 5-14% of emergency visits. Delay in diagnosis and inappropriate treatment result in renal scar, hypertension and chronic renal failure. The aim of this study was to compare the clinical and paraclinical findings of UTI in neonates and infants

**Methods:** In this cross-sectional study, 118 neonates and infants with UTI were evaluated. This study was conducted in Qods children hospital affiliated to Qazvin University of Medical Sciences (Iran) in 2008-2009. Clinical and paraclinical findings of UTI were compared in two groups. Data were analyzed by statistical methods.

**Results:** The mean age of patients was  $173 \pm 59$  days. The most common symptoms were fever (66/9%) and poor feeding (62/7%). Letargy, diarrhea, vomiting, jaundice, grunting and FTT were other symptoms. The most common grown microorganism in urine culture was E-coli (80/5%). Other grown microorganisms included Kelebsiella, Proteus, Pseudomonas, entrobacter and Staphylococcus areous. The most of microorganisms were sensitive to Ceftriaxone and Aminoglycosides. Most of organisms were resistance to Ampicillin (94/3%), Cephalotin (86/7%) and Trimetoprim-Sulfamethoxazole (76/9%). There was significant differences between two groups regarding sex ( $P=0.049$ ), WBC count ( $P=0.044$ ), result of blood culture ( $P=0.001$ ) and DMSA scan ( $P=0.013$ ). Other clinical, Laboratory and imaging findings were similar in two age groups ( $P>0.05$ ).

**Conclusions:** Clinical, Laboratory and imaging findings were often similar in urinary tract infection of neonates and infants except for sex, WBC count, result of blood culture and DMSA scan.