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Methods: We studied children younger than 15 years with respiratory symptomatology of any duration, recording clinical issues relevant to active TB through a medical questionnaire and consultation. We performed serial induced or spontaneous sputum collection for acid-fast staining, culture and phenotypic/genotypic drug susceptibility testing.

Results: We examined 2550 indigenous children. 9.1% of children (33/363) were TB-positive, 66% were men, 69.7% had 5-14 years and the majority came from rural areas (81,8%). Among TB cases, 90% of sputa were induced, 18.2% had positive BK and 100% were culture positive. Mean cough duration was 9 days, mean expectoration duration was 7 days, 27.3% of children had no expectoration, 33% had previous TB contact, 12.1% lived with current TB cases, 1 patient had previous TB diagnosis, 69.7% lived in overcrowding dwellings, 48.5% had BCG scar, 23.3% had abnormal auscultation and 12.1% showed adenopathies. We found 1 MDR-TB case.

Conclusions: Pediatric TB incidence (1 294/100 000) was 563 times higher than in general pediatric population (2.3/ 100 000). Induced sputum was a good alternative for sputum sampling: it identified 90% of TB cases.

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Ten years of Pediatric Tuberculosis: A retrospective study in Mersin, Turkey

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Objective: The aim of the present study was to evaluate paediatric TB cases that were confirmed by culture positivity in our region, retrospectively.

Materials and Methods: A total of 1205 clinical samples of 518 suspected TB patients, sent from various pediatric clinics to the Mycobacteriology Laboratory of the Medical Microbiology Department of Mersin University Medical Faculty, were examined retrospectively, between January 2006 and December 2016. Patients with culture positivity were included in the study group. Patients data were collected according to

demographic features (age, sex), close contact story with the TB patient, tuberculin skin test positivity, microbiological diagnostic methods, organ and tissue location.

Results: Of the 518 patients, 27 (5.2%) were determined as culture positive. Sample distributions as follows: Sputum, starvation gastric fluid, bronchoalveolar lavage, pleural fluid, tissue, abscess, biopsy, cerebrospinal fluid, gaita. Of the 27 patients, 16 were culture positive, 11 were both culture and ARB positive. Of the 27 patients, 14 cases (51.9%) were pulmonary TB; 3 cases (18.5%) were TB meningitis; 2 cases (7.4%) were miliary TB, 2 cases (7.4%) were TB pleurisy; 2 cases (3.7%) were bony-articular TB; 2 (7.4%) cases were TB leishmaniasis; 1 (3.7%) case was intestinal TB and 1 (3.7%) case was both pulmonary TB and TB pleurisy. One of the TB lymphadenitis cases was detected as occurred due to the BCG vaccine strain. Of the 27 patients, 18 (66.7%) were male, 9 (33.3%) were female and the mean age was 10.1 (min-max: 5 months-15 years). The family contact history was detected in 13 cases and 10 cases had tuberculin skin test positivity.

Conclusion: The diagnostic approach in pediatric TB is usually based on history of TB contact, tuberculin skin test positivity, clinical and radiological findings rather than bacteriological examination. In the light of all these findings, correlations between these parameters, especially culture positivity in close contact story with the TB patients, might be crucial to the certain diagnose in pediatric TB.

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Efficacy of isoniazid in a syrup comparing to tablets in providing IPT in children

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Summary: The purpose of the study was to conduct an analysis of the efficacy of isoniazid in the form of syrup vs. isoniazid in tablets for providing IPT in children.

Materials and methods: 104 children (0-5 years old) who were in contact with MTB and eligible for IPT were divided into Main Group, n= 56, who received isoniazid in the form of syrup (10 mg/kg daily = 0.5 ml/kg), and Control, n=46, who received isoniazid in tablets (standard doses).

Results: Significantly lower levels of total protein were reported in Main Group - by 9.6% than in patients in Control (p<0.05). Also significantly higher levels of bilirubin - by 17.2%, ALT (alanine