

## **04E. EDUCATION: COMMUNITY ACQUIRED INFECTIONS: RESPIRATORY TRACT INFECTIONS**

**ESP17-1358**

### **PECULIARITIES OF RESPIRATORY SYNCYTIAL BRONCHIOLITIS IN INFANTS**

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#### **Title of Case(s)**

Peculiarities of respiratory syncytial bronchiolitis in infants

#### **Background**

Acute lower respiratory infection is the leading cause of global child mortality. Respiratory syncytial virus (RSV) is believed to be the most important viral pathogen causing acute lower respiratory infection in young children. Respiratory Syncytial Virus (RSV) is the most important factor of the death of infants among all virus infections. In the first year of life, 50% of children infected with RSV, and 40% patients developed an infection of the lower respiratory tract. During the first two years of life every child at least once suffers from RSV infection. RSV is responsible for 50-80% of cases of bronchiolitis.

#### **Case Presentation Summary**

Fifty one children (median age 2,7 months) admitted to the pediatric department with RSV bronchiolitis were enrolled in the study. The highest morbidity was observed in January-March. Twenty three children (45,2%) hospitalized in severe condition, twenty six infants (50,9%) suffered from moderate bronchiolitis. Initially ten children (19,6%) were hospitalized in the PICU, six infants (11,7%) were mechanically ventilated (median 3,5 days), seven patients treated with oxygen (median 1,3 days). White cell count (50,6% children), neutrophil count (64,5% infants) were increased. Nineteen children (37,3%) had complications of congestive heart failure and treated with diuretics and cardiac glycosides.

#### **Learning Points/Discussion**

Up to 45% of children with RSV bronchiolitis characterized by severe condition, and half of them were hospitalized in the PICU, which increased risk for bacterial co-infection.