Poster Presentations

44th Annual General and Scientific Conference of the Paediatrics Association of Nigeria (PANCONF), 22nd - 26th January, 2013

P101

Synopsis of Paediatric Emergency Presentations in Abakaliki: 18 months review

Ujunwa FA, Manyike C , Ukoh U
Federal Teaching Hospital Abakaliki

Introduction: Children emergency room is usually the major source of all pediatrics admissions. In order to effectively plan and allocate scarce resources there is need to study the pattern of emergency paediatrics admissions especially in a new center.
Objective: To determine the pattern of pediatrics emergency room admissions in Abakaliki.
Methods: Pediatrics admissions records in the emergency room of Federal Teaching Hospital Abakaliki over an 18months period were recorded in a profoma. Data was analyzed using SPSS version 17.0.
Results: There were 1308 admissions within the study period , this consists of 753males and 549 females, 6 were unclassified. The mean age of the population was 3.15±3.67years, under five constituted 81.2% , while school age children and adolescents constituted 10.7% and 8.35% respectively .Communicable diseases comprise 1077 (82.3%) while non-communicable diseases constitute 230 (17.6%) of the diseases. The top five diagnosis were malaria and its complications (33.6%), acute diarrhea diseases(18.7%), pneumonias(12.6%), sepsis(10.6%) and sickle cell anemia (6.0%)and these were commoner in under fives ($p<0.05$). Haematological system 44.1%, digestive (21.7%) respiratory(17.9%) and central nervous systems (7.5%) were the four commonly affected systems. About 19 (1.6%) were discharged against medical advice, 1126 (92.5%) were either discharged home or transferred to the Pediatrics for further management while72 (5.9%) patients died.
Conclusion: Synopsis of admissions shows that malaria, diarrhea diseases and respiratory tract infections still constitutes a significant morbidity in children.

P102

Pattern of Morbidity and Mortality of Childhood Diseases in the Children Emergency Room of Federal Medical Center, Asaba

Ezeonwu B, Omoruyi C, Nwafor I.
Department of Pediatrics, Federal Medical Center, Asaba

Background: The pattern of childhood morbidity and mortality especially in those under 5 years of age is an important indicator of the wellbeing of the children in a country.
Objectives: To determine the pattern of morbidity and mortality of childhood diseases in the Children Emergency Room (CHER) of FMC, Asaba and the related age, gender and seasonal distribution incidence.
Method: A descriptive case series review of the admission registers in CHER from January 2007 to December 2011 was done. Information obtained were age, gender, month of admission, diagnosis and outcome.
Results: A total of 3,830 children between the ages of 1 and 180 months (15 years) comprising of 2,189 males (57.2%) and 1,641 (42.8%) females was admitted within the period under review. Children less than 5 years old were 2,912 (76.0%) and 1165 (40.0%) of these were infants. The common causes of admission were malaria (30.3%), diarrheal diseases (20.4%) and respiratory tract infections (19.0%). Admissions were more during the wet season (2161) than dry season (1669), χ^2=142.4, p=<0.0001. There were 221 deaths: 128 (57.9%) in males and 93 (42.1%) in females. Greater than 80% of deaths occurred in children less than 5 years of age, χ^2=8.51, p=0.003 and 53.8% of these deaths occurred in infants. Major causes of death were complicated malaria (24.4%), sepsis (19.9%), diarrhoeal diseases (18.1%) and respiratory tract infections (7.7%).
Conclusion: Malaria, respiratory tract infection and diarrheal are the major causes of morbidity and mortality in CHER and children less than 5 years of age are commonly affected.

P103

Mothers' Knowledge and Practices of Infant Sleep Position

Okpere AN, Opara PI.
Department of Pediatrics, University of Port Harcourt Teaching Hospital, Port Harcourt.

Background: Prone sleeping by infants has been associated with increased risk of sudden infant death syndrome (SIDS). This led to the AAP recommendation that infants be placed to sleep on their backs to reduce the risks of SIDS. Many child care providers continue to be unaware of the association of SIDS and infant sleep position and/or are misinformed as to the risks and benefits of the various sleep positions.
Objectives: These were to explore mothers' knowledge and practices concerning infant sleep position and SIDS.
Methods: This study was carried out amongst mothers presenting with infants to the Paediatric Outpatient Clinics of the University of Port Harcourt Teaching Hospital. A structured, anonymous and self-administered questionnaire was used to obtain information on biodata, awareness information, response and practices. Data

were analysed using SPSS version 16.0.
Results: Two hundred and eighty two mothers participated in the study. 165 (58.5%) of them had tertiary education while 239 (91.8%) were married. Mean age of infants was 7.11± 3.53 months. The commonest sleep position was prone (43.6%), while the least common was back (17%). Common reasons for choice of position were comfort and baby sleeping longer. 223(79.1%) were unaware of any medically recommended sleep position. Of those who were aware, the commonest source of knowledge were nurses. 95 (33.7%) had heard of SIDS but over 80% of these did not know the cause.
Conclusion: Mothers have poor knowledge of infant sleep position. Doctors should take more active part in educating mothers on safe child care practices.

P104
Abdomino-Pelvic Ultrasonographic Findings in Children with Recurrent Abdominal Pain

Ibitoye PK,[1] Kakale SB,[2] Tahir Y, [1] Jiya NM. [1]
[1]Departments of Paediatrics, and [2]Surgery Usmanu Danfodiyo University Teaching Hospital, Sokoto, Sokoto State

Background: Recurrent abdominal pain (RAP) occurs commonly in otherwise apparently healthy children and can be a source of concern for most caregivers. Apart from reassurance of the caregiver after thorough examination, abdomino-pelvic ultrasound scan (USS) is an important non-invasive tool for immediate evaluation.
Objective: To determine abdomino-pelvic USS findings in children aged between 3 and 12 years who had RAP.
Method: This study was carried out in a private specialist clinic in Sokoto metropolis. A prospective register of all children aged between 3 and 12 years who had abdomino-pelvic USS following presentation with RAP was kept within the study period of 18 months (January 1st, 2011 till June 30th, 2012). Abdomino-pelvic USS was done using 3.5 MHz and 7.5 to 11 MHz curvilinear and linear probes of DP 8800 Mindray ultrasound machine. Sickle cell anaemia patients were excluded.
Results: One hundred and sixty two children (9.1%) presented with recurrent abdominal pain of the total 1783 patients seen during the study period with female to male ratio of 1.4:1. Pain was mostly peri-umbilical (65.4%), with majority having RAP for 6 weeks to 3 months (82.1%). One hundred and nine (67.3%) had normal abdomino-pelvic USS findings. Enteritis was diagnosed in 23 (14.2%), cystitis in 21 (13%), grade II parenchymal disease in 8 (4.9%) and generalized mesenteric adenitis in 1 (0.6%).
Conclusion: RAP is a frequent occurrence in children, however apart from just reassuring the caregivers and the patients, abdomino-pelvic USS should be done. This ensures that more sinister organic causes are not missed.

P201
Juvenile Myasthenia Gravis: Case Report and Literature Review

Frank-Briggs AI, Okoh BAN, Tobi N.
Departments of Pediatrics and Child Health, University of Port-Harcourt Teaching Hospital, Port Harcourt, Rivers State, Nigeria.

Background: Myasthenia gravis is an autoimmune disorder affecting the neuromuscular junction. It is non hereditary and characterized by autoantibodies which bind to acetylcholine (Ach) receptors at the motor end plate. The resultant effect is impaired Ach function, impaired nerve conduction and muscle weakness. Isolated ocular involvement (ptosis) is the most common presentation, characterized by easy fatigability of muscles, particularly the extraocular muscles, muscles of mastication, swallowing and respiration. Diagnosis is typically by Tensilon test; management modalities include use of antichlinesterases, immunosuppressant drugs, plasmapheresis and thymectomy where indicated. It is commoner in females and onset is usually after 10 years of age. It is not a common finding in boys, hence this report.
Case presentation: A seven year old male presented with a two year history of drooping of both eye lids that progressively worsened over time. He has had several medications from different orthodox and unorthodox facilities. Examination revealed bilateral ptosis (the left eye worse than the right) and bilateral ophthalmoplegia. A diagnosis of Juvenile Myasthenia gravis with ophthalmoplegia was made and this was confirmed using intramuscular Neostigmine, as Edrophonium was unavailable. He was commenced on oral Neostigmine at a dose of 0.04mg/Kg 6 hourly and is on regular follow up in the Paediatric Neurology Clinic in our institution
Conclusion: Juvenile myasthenia gravis is a rare autoimmune disease of childhood, high index of suspicion is necessary to make a diagnosis for proper management.

P202
A Rare Case of Juvenile Myasthenia Gravis: A Case Report

Idris HW., Mado SM, Anyiam JO, Afegbua D,
Adeoye GO, Sobowale AM
Department of Pediatrics, Ahmadu Bello University Teaching Hospital Shika-Zaria

Introduction: Juvenile Myathenia Gravis is a chronic autoimmune disorder which occurs when serum antibodies combine with nicotinic acetylcholine receptors at the muscle membrane of the motor endplate impairing the neuromuscular transmission. This results in early muscle fatigability with progression to a complete paralysis during repetitive movement.
Case presentation: 5 year old boy with a 4 month history of drooping of the eyelids. It began initially with the right then
Progressed to involve the left after a month. No weakness in any other muscle groups, difficulties in feeding

or breathing. No preceeding history of head trauma, drug use or seizures. He had bilateral ptosis, easy fatigability of the muscles of the hands and shoulder girdle. No neck swelling or hypertension. Serum biochemistry, thyroid function tests, neck ultrasound and Brain MRI were normal.
He had a dramatic response to Tensilon test using Neostigmine and was subsequently commenced On Oral Neostigmine bromide and is doing well on clinic follow up. The relative rarity of Juvenile Myasthenia Gravis results in a dearth of local studies especially in the pediatric population.

P203
Beckwith Weidemann Syndrome: A Case Report

Amadi OF, Ezenwosu OU, Nwokoye IC, Ani SO.
Department of Pediatrics, Enugu State University Teaching Hospital, Park-Lane, Enugu

Background: Beckwith Weidemann Syndrome is a congenital disorder made up of a myriad of anomalies characterized by overgrowth of body tissue (Visceromegaly), anatomic defects and metabolic derangement.
Incidence is stated to be 1 in 15,000 live births in the general population with a higher incidence amongst babies conceived by in Vitro fertilization. It is associated with chromosomal re-arrangement with 85% of the rearrangement occurring sporadically.
Case presentation: Baby LE was delivered to a 29 years old para – 2 lady by Cesarean section for pre-eclampsia and breech presentation. Routine Antenatal ultrasound done in the second trimester revealed polyhdramnois, foetal Macrosomia and ® Hydronephrosis. The paediatric team took over immediately after birth. The Random Blood Sugar done within 10 minutes of birth showed blood glucose of 35 mmol/L (1.9mm/L) in a macrosomic female neonate with birth weight 5.4kg and Apgar score of 5^1 8^3. She was noted to have several dysmorphic features.
Her management was multi-disciplinary involving the pediatric surgeons and the orthopaedic surgeons. She was discharged on the 30^{th} day of life and is currently 8 months old and still being followed-up in the clinic.
Conclusion: Early and coordinated multi-disciplinary management would improve survival and quality of life in affected children even in resource poor setting.

P205
A Case of Osteogenesis Imperfecta Type II, A Diagnosis made almost Too Late in a Resource Poor Setting

Ibekwe MU, Ogugua CF, Ogeh CO.
Federal Teaching Hospital Abakaliki

Introduction: Osteogenesis imperfecta (OI) is a rare autosomal dominant disorder of COL I, characterized by excessive bone fragility with low bone mineral density (BMD). Types II is associated with extreme bone fragility leading to intrauterine or early infant death.
Case presentation: we report a case of a full term male neonate with progressive respiratory distress from birth. He was seen in children's emergency room 2 hours after vaginal delivery from a peripheral clinic with difficult breathing. Pregnancy and delivery were uneventful and born to non-consanguineous monogamous parents. On examination he was dyspnoeic, cyanosed with malformed and fractured upper and lower limbs. An assessment of osteogenesis imperfecta type II was made and resuscitation instituted. However respiratory distress worsened and baby died at 6 days of life.
Conclusion: Ultrasonography is useful for prenatal diagnosis of the severe forms of OI. If detected prenatally a more appropriate management can be instituted to reduce morbidity and mortality.

P206
Prune Belly Syndrome Presenting In a Set of Twins at the National Hospital Abuja: A Case Report

Audu LI, Mukhtar-Yola M, Mairami AB, Otuneye AT, Tahir LM, Papka NY, Mshelia LJ, Maitala H.
National Hospital Abuja.

Introduction: Prune belly Syndrome, a rare congenital malformation presenting at birth with multiple organ involvement has rarely been reported in multiple gestations.
Case Presentation: Delivered at 34weeks, both babies were noticed to have lax anterior abdominal wall, bilateral flank fullness, multiple abdominal masses and undescended testes at birth. Antenatal ultrasound had indicated the presence of abnormalities in only one baby. Their 31-year-old mother had had 3 previous 1^{st} trimester abortions. Both twins had bilateral loop ureterostomies on the 5^{th} day of life that resulted in some improvement in their renal functions. Although the babies were discharged at the age of 24 days to be followed up at the clinic, the 1^{st} twin died from suspected aspiration at home during the late neonatal period, while the 2^{nd} twin died from an infection in early infancy.
Conclusion: Management of this rare condition is still a big challenge in our environment.

P301
Congenital Hypothyroidism: A Call for Renewed Effort towards Neonatal Screening

Idris HW. Mado SM, Abdullahi S, Abdullahi M, Abegunde T, Abdullahi U, Mayaki S.
Department of Pediatrics, Ahmadu Bello University Teaching Hospital, Shika-Zaria.

Background: Congenital hypothyroidism is one of the commonest endocrine disorder in the new born. It is one of the major causes of preventable impairment in physical growth and mental retardation. Commonly grouped together as thyroid dysgenesis, maldevelopment (aplasia and hypoplasia) and maldescent (ectopic gland) are the usual cause. However, worldwide, neonatal screening programs have significantly reduced the incidence of intellectual deficits in hypothyroid children treated early.
Objective: To highlight the need for early diagnosis and

early prompt treatment in the management of congenital hypothyroidism.
Method: In this retrospective analysis, case files of 5 patients being followed up for congenital hypothyroidism in our Pediatric endocrinology clinic were retrieved and evaluated with respect to presenting complaints, physical findings, results of thyroid function test and age at diagnosis as well as response to therapy.
Results: While all the patients showed marked improvement in symptoms, eventual intellectual outcome was poor on account of delays in presentation, diagnosis and initiation of therapy.
Conclusion: The necessity of routine neonatal thyroid screening programs is emphasized with the aim of detecting congenital hypothyroidism.

P302
Factors that Affect the Time to Diagnosis of Childhood Cancer at the University Of Nigeria Teaching Hospital (UNTH) Enugu

Chukwu BF, Ezenwosu O, IkefunaAN, Emodi IJ.
Department of Pediatrics, University of Nigeria Teaching Hospital, Enugu.

Background: Childhood cancer is a leading cause of childhood mortality in developed countries though ranks lower than infections in developing countries. Most patients with malignancies present late to hospital with consequent adverse outcome. Early diagnosis, therefore, is an important requirement in child oncology as delayed diagnosis is associated with poor prognosis and huge economic cost.
Objectives: Identify factors affecting the diagnosis of childhood cancer at UNTH.
Methods: Children aged 0-18 years with histological diagnosis of cancer were reviewed prospectively over a 22 month period. An interviewer structured questionnaire was administered to patients or parents/ caregivers to obtain social and clinical information on the patients.
Result: Sixty one patients were confirmed to have cancer. Median duration from onset of symptoms to confirmation of diagnosis (lag time) was 14 weeks and significantly longer than the accepted upper limit lag time of 4 weeks ($p<0.0001$, Wilcoxon Signed Ranked Test). Major contributors to delay are parents and the type of cancer with acute lymphoblastic leukemia (ALL) having the shortest lag time of 3.5 weeks and Hodgkin lymphoma the longest, 60.4 weeks ($p=0.01$, Mann-Whitney test). The median duration from onset of symptoms to first consultation with a qualified doctor (parents' delay) was 8.6 weeks and doctor's delay (from first consultation till diagnosis) was 3.6 weeks showing a significant difference in the two categories of delay ($p<0.0001$, Mann-Whitney test).
Conclusion: Public awareness and health system reform is imperative for early diagnosis of childhood cancer in our environment.

P303
An Unusual Presentation of Non-Hodgkins Lymphoma: Case Report

Enemuo A, Ujunwa F A, Ikefuna AN.
Department of Pediatrics, University of Nigeria Teaching Hospital, Enugu.

Introduction: Non- Hodgkins lymphomas are highly malignant tumor which usually runs a rapid clinical course. The prognosis usually depends on the stage at presentation.
Case Presentation: A 14year old female that presented at surgical outpatient department of UNTH with an enlarging left breast mass of over 4months, weight loss and left breast pain of 1month.Who had 3 abdominal surgeries in a year; 2years prior to the onset of the illness for recurrent abdominal discomforts, of which an egg-sized mass was excised but was not studied.
Examination revealed a diffusely enlarged left breast with a circumscribed mass at the lower inner quadrant. A wide local excision biopsy was done. She was discharged on antibiotics and analgesics but was not compliant with follow up.
She represented after three months with another left breast mass as well as an abdominal mass.
The left breast was diffusely enlarged, with firm-hard areas measuring about 20cm by 20cm. The right harbored multiple lumps of about 4cm by 4cm each and a firm nodular 20 weeek sized suprapubic mass. Her anthropometric measurements were within normal.
Histologic diagnosis was Diffuse Non-Hodgkins lymphoma. She was placed on chemotherapy.
Conclusion: Non–Hodgkins lymphoma can mimic breast cancer. A high index of suspicion and prompt histological diagnosis are needed for effective management.

P304
Childhood Adoption in Sokoto: A Private Specialist Clinic Experience

Ibitoye PK , [1] Ugege MO, [1] Airede KI. [2]
[1]*Department of Paediatrics, Usmanu Danfodiyo University Teaching Hospital, Sokoto.*
[2]*Professor of Perinatal-Neonatal Medicine, Department of Pediatrics, University of Abuja. Teaching Hospital, Gwagwalada, Abuja, FCT.*

Background: Child adoption focuses on placing a child with substitute family. This provides optimal developmental environment because care and parenting are permanent unlike in institutional care and fostering. Despite dividends of child adoption, it is not widely practiced in the country.
Objective: To determine pattern of child adoption, factors influencing it and its outcome.
Methods: All cases of child adoption from January 1st 2009 to June 30th, 2012 were analyzed for adoptees' gender, age at adoption, source and significant medical findings as well as reason for adoption, ages, social class, ethnicity, religion, years of marriage without a

child/ number of existing children of adoptee caregivers and outcome.
Results: There were 13 (0.06%) cases of child adoptions of 2156 children seen during the study period with male to female ratio of 3.3:1. Ages at adoption ranged from approximately 72hours to 12weeks. Three of the children were adopted from orphanages in the south-western region of the country; one was picked from a sewage drain while sources were not disclosed in others. Reasons for adoption include infertility {10 (76.9%)}, male gender {2(15.4%)} and on compassionate ground {1 (7.7%)}. Ages of adoptee mothers ranged from 28years to 51years (mean 41 years). Most adoptee mothers belong to social class II (76.9%), are Igbos (69.2%), Christians (92.3%) and have been married without a child for more than 10years (53.8%).
Conclusion: The child adoption practice is poor in Sokoto. There is need to improve general public awareness of childhood adoption and its benefits.

P305
Obstructive Ureteric Stones in a Nigerian Child: A Case Report Highlighting the Challenges of Management in our Environment

Odetunde OI, Okafor HU, Ukoha OM[1], Adiele KD, Uwaezuoke SU, Onyia JOT.
Department of Pediatrics, University of Nigeria Teaching Hospital, Ituku/Ozalla, Enugu

Background: The most common cause of obstruction in the urinary tract in children is a congenital obstruction. Although less common, urinary tract obstruction can occur as a result of kidney stones.
Case presentation: We report the case of a 22 month old male child who was admitted into the paediatric ward with a two week history of progressive body swelling, a week history of inability to make urine associated with excessive crying , restlessness and vomiting. Symptoms were preceded by a non-specific febrile illness. He had a normal diet and water consumption prior to onset of symptoms. No family history of kidney stones. Drug history revealed a high vitamin C intake. Radiologic evaluation revealed obstructive urolithiasis secondary to bilateral ureterovesical junction obstruction with left sided nephrolithiasis. MCUG was not revealing. Urine evaluation revealed features in keeping with sterile pyuria. A urinary biochemistry was not done due to lack of supportive laboratory. He had several sessions of peritoneal dialysis, potassium citrate and antibiotics were also prescribed. Serial renal ultrasonography was used to follow the status of the calculus. Overtime, the stones diminished in size and progressively moved into the bladder. He is currently been followed up at the clinic.
Conclusion: In every case with obstructive uropathy, ureteric calculi should be included in the differential diagnosis.

P401
Collodion Baby: A Case Report

Obu HA, Chinawa JM, Obumneme-Anyim IN
Department of Pediatrics, University of Nigeria Teaching Hospital, Ituku/Ozalla, Enugu

Introduction: A two day old male baby, the third consecutive child of a consanguineously married couple with clinical features of Collodion baby. Early recognition of this clinical entity and early institution of appropriate therapy can definitely reduce morbidity and mortality in neonates.
Case presentation: We present M.H a two day old male neonate of Fulani descent. Parents are first cousins. Mother did not receive adequate antenatal care and patient was delivered at home by his paternal grandmother. The abnormal appearance of the baby was noticed at birth. Patient is the third consecutive child of the mother with similar presentation at birth. The first of the series is alive and well while the second child died after one week of life in the Newborn special care unit (NBSCU) of the University of Nigeria Teaching Hospital Ituku-Ozalla Enugu following complications.
On examination the baby weighed 2.5kilograms, with a length of 48 cm and had head circumference of 34 cm. There was ectropion and absence of eyelashes and eye brows with an O-shaped mouth (eclabium). The skin was semi transparent, and had a parchment like feel with varying degrees of fissures at groin, axilla and joint regions. Systemic examination was essentially unremarkable. The Collodion membrane peeled off within 19 days revealing normal raw skin underneath. Patient was subsequently discharged home in a fair condition.

P402
Knowledge and Attitude of Parents and caregivers toward Children with hydrocephalus in Southern Nigeria

Frank-Briggs AI, Okoh BAN, Alikor EAD
Departments of Paediatrics & Child Health, University of Port-Harcourt Teaching Hospital, Port Harcourt, Rivers State, Nigeria.

Introduction: Attitude towards people with hydrocephalus is influenced by the level of their knowledge. Parents do not easily accept the diagnosis and prognosis in affected children. This study was to assess fifty eight parents' knowledge and attitude towards children suffering from hydrocephalus by answering a questionnaire.
Objective: To evaluate the knowledge and attitudes of parents towards children with hydrocephalus.
Materials: This was a prospective study in a tertiary hospital. Parents who had children suffering from hydrocephalus from 1st August 2011 to July 31st 2012 were recruited. Questionnaires were administered to them and their responses obtained.
Results: A total of 1,014 neurological patients were seen in the study period. Of these, 58 parents whose children suffered from hydrocephalus participated in the

study. Thirty three (56.9%) of them believed the increasing head size was as a result of the child's destiny. It is believed that such children are from the "spirit world" and the big head being their characteristic. Others 12 (20.7%) believed they were special children with "wisdom". Some parents thought hydrocephalus was linked with evil spirit/ demonic attack; 3(5.17%) parents believed they are worthless children and others believed they are special breed who could achieve much in life if well cared for. The attitude of parents towards these children included pity and compassion, tolerance, abandonment, depression, some parents felt indifferent or helpless as they thought the anomaly was their plight.
Conclusion: Health workers should educate and give more information to the public about hydrocephalus: its causes, clinical manifestations and management.

P403
Profile of Paediatric skin disorders in a tertiary institution in North Central Nigeria

Okolo SN, Adah RO, Abdu HA.
Department of Pediatrics, Jos University Teaching Hospital, Jos.

Introduction: Presentation of children to health institutions who have skin disorders is common, however most skin related symptoms are not sought for by many Paediatricians or at best considered insignificant.This gap has caused the burden of this disease to be largely unknown in developing countries.It is important to establish the baseline pattern of skin diseases among Nigerian children to raise awareness among healthcare professionals.
Objective: To determine the pattern of skin diseases in patients attending the Pediatrics dermatology outpatient clinic of a tertiary institution in Nigeria
Method: Using a structured questionnaire, a prospective study of patients presenting in the paediatric dermatology outpatient clinic of Jos University Teaching Hospital between November 2011 and October 2012 were assessed for skin disorders. Data was analysed using SPSS v. 19.
Results: Out of 1,256 new patients attended to in POPD, 150 children with 172 dermatoses were seen, giving a prevalence of 11.9%. Age ranged from four days to 18 years with a mean age of 2.23 ± 1.17 years. Males were 81(54.0%) with a male: female ratio of 1.2:1.More than half of the lesions (55.4%) were seen in the under-fives. Non-infectious causes accounted for 74.7% with dermatitis being the commonest, while fungal disorders topped the infectious causes.
Conclusion: The prevalence rate of 11.9% of this disorder is remarkable. There is therefore need for Pediatricians to actively search and manage skin conditions.

P404
Knowledge and Attitude of Mothers towards Childhood Epilepsy in Kaduna Northwestern Nigeria

Eseigbe EE,[1] Anyiam JO, [1] Enogela J,[2] Adama SJ, [3] Ibrahim YI, [4] Odumu P,[5]Eseigbe P, [5] Ibok SI.[5]
Departments of [1]Pediatrics and [4]Family Medicine, Ahmadu Bello University Teaching Hospital (ABUTH), Shika-Zaria, Nigeria. Departments of [2] Community Medicine, [3]Paediatrics and [5]Family Medicine, 44 Nigeria Army Reference Hospital (NARH) Kaduna, Nigeria.

Introduction: Management of childhood epilepsy is characterized by significant treatment gap in developing countries. Poor knowledge has been identified as one of the contributory factors. The viewpoint of mothers, because of their pivotal role in child care, on this disorder is important to bridging this gap and providing comprehensive care.
Objectives: To assess the knowledge and attitude of mothers towards childhood epilepsy.
Method: A structured questionnaire was administered to mothers attending a primary health care center.
Results: A total of 523 mothers were interviewed. The age range of the mothers was 17 to 52years (mean 27.5±10.3years).Most were < 30 years old (57.4%), petty traders (41.3%) and having a secondary education (39.8%). Spiritual etiology (47.2%), falling to the ground (69%) and the community (64.1%) were the commonest cause, manifestation and source of information indicated by the mothers respectively. Knowledge of childhood epilepsy was good, fair and poor in 21.4%, 29.8% and 48.8% of the mothers respectively. Good knowledge was significantly associated with having, a tertiary education and, a relative with childhood epilepsy. Even though 70.7% of the mothers indicated that they are sympathetic to the plight of affected children, majority would neither allow having their children in the same class with a child who has epilepsy (83%) nor allow them share eating utensils (92%).
Conclusion: The study was characterized by inadequate knowledge and inappropriate attitude of mothers towards childhood epilepsy. It underscored the need to promote and strengthen public awareness initiatives.

P405
Effect of Health Education on Knowledge of Patent Medicine Vendors on Malaria Case Management and Control in Calabar, South, Nigeria

Nwaneri DU,[1] Mmeremikwu MM,[2] Ibadin MO. [3]
*[1]Institute of Child Health, University of Benin, Benin City; +Department of Paediatrics, [2]University of Calabar Teaching Hospital, Calabar; *Department of Child Health, [3]University of Benin Teaching Hospital, Benin City, Nigeria.*

Background: Patent medicine vendors are usually the first level health care providers as regards to malaria in Nigeria. Their close-to-client operation can play significant role in the fight against malaria if their health

knowledge of the disease and appropriate interventions is improved.
Objectives: To assess the effect of health education of patent medicine vendors on their knowledge of malaria case management and control.
Methods: Subjects were patent medicine vendors seen during a malaria control campaign programme in Calabar-south District, Nigeria in June 2011. The health education involved a three hour training and focus group discussion using the national guideline on malaria case management in Nigeria. A pre and post-test questionnaires were used to obtain data before and after the training session.
Results: Of the 91 patent medicine vendors that participated in the pre-test (male 60, female 31; mean age [SD] 37.2 [8.4] years; range 20 – 60 years); 60 (male 41, female 19; mean age [SD] 36.4[8.96] years; range 21 – 60 years) completed the post-test. All subjects agreed that malaria is transmitted through mosquito bite. There was significant improvement on knowledge of appropriate drug treatment of simple malaria (Artemisinin-based combination therapy); (pre-test 71/91(78.0%), post 55/60(91.7%), p =0.027), improved paediatric antimalarial prescription (pre-test 38/91(41.8%), post 38/60 (63.3%), p = 0.009), and awareness of the national guideline for community case management of simple malaria (pre-test 66/91(72.5%), post 52/60(86.7%), p = 0.04). Improved performance did not significantly depend on educational status and duration of year of practice of the respondents (β = -0.26, SE = 0.32, p = 0.42) and (β = -0.02, SE = 0.02, p = 0.40) respectively. Most of the subjects identified long lasting insecticide-treated nets as tool for control of malaria vector.
Conclusions: Health education significantly improved the general knowledge of patent medicine vendors on malaria case management irrespective of their educational status and year of practice.

P406

Audit of Blood Transfusion Practices in the Paediatric Medical Ward of a Tertiary Hospital in Southeast Nigeria. A one year review

Ughasoro M D, Ikefuna AN, Ibeziako SN, Emodi IJ.
Department of Paediatric, University of Nigeria Teaching Hospital (UNTH), Enugu.

Background: Blood transfusion is a valuable healthcare practice. But differences in their indications and outcome exist.
Objectives: To determine the indications, practices and outcomes of transfusion on children (1month to 18 years).
Methods: A retrospective one year (January – December 2011) review of case notes and nurses records in paediatric wards of UNTH.
Results: A total of 325 blood transfusions were given within the review period, out of which 238 transfusions administered amongst 95 patients were reviewed. The rate of transfusion was higher amongst children with cancer (20.2%) especially leukemia, Sickle cell anaemia (13.4%), sepsis (12.6%) and malaria (10.9%). Whole blood (51.3%) and sedimented cells (34.5%) were the main types of blood transfused while main blood group of the transfused blood were O+ (49.6%) and B+ (26.9%). About 96.4% were transfused appropriate volume of blood. There was a mean Hb increase of 3.1g/dl in 217 recipients with only 28 (12.8%) recording an increase of $\geq$ 5g/dl. There was a return of pulse rate and respiratory rate to normal post transfusion in 26.1% and 21.8% of the recipients respectively. Minor adverse events of chills/fever and body itching was reported in 5% and 3.4% respectively.
Conclusion: The administration of blood transfusion in this tertiary institution is not uncommon. Indications include non-communicable diseases. The expected optimal rise in Hb and normalizing of vitals sign are not always the case. Transfusion-related adverse events are rare. The reason(s) for the overall sub-optimal effect of single appropriate transfusion on recipients need further study.