

28th WORLD NEONATAL, PEDIATRIC AND FAMILY MEDICINE CONFERENCE

March 21-22, 2019 Dubai, UAE



Scientific Tracks & Abstracts (Day 1)

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Prevalence of nosocomial pneumonia associated to ventilators by MDR pathogens in a second level hospital during a two year period

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Aim: The study aims to determine the frequency of ventilator associated pneumonia by MDR bacteria, patient's characteristics and associated mortality rate in Hospital Issstecali during 2016-2017.

Design: It is a descriptive, observational, analytical and retrospective study.

Method: We collected data from the clinical records of patients who had presented ventilator associated nosocomial pneumonia with a bacterial isolate with an MDR profile. We included gender, age, comorbidities, predisposing risk factors, results of isolates, sensibility pattern, days of stay and obtained results. Frequencies and rates were calculated.

Results: During January 2016-November 2017, there were 106 cases of nosocomial pneumonia of which 56 of them were ventilator related. Bronchial secretion cultures were included in a 52% coming from men of median age of 62 years, comorbidities, arterial hypertension (50%), diabetes mellitus (41.5%), chronic kidney disease (14.9%), stroke and bedriddenness. A mean of 27.3 days of hospital stay were calculated. Of the total cultures, 26 of them showed development of bacteria with a MDR phenotype (24%) (Attack rate: 3.6 cases/1000 days of mechanical ventilation). *Pseudomonas aeruginosa* in 11 cultures (42.3%), *Crhyseomonas luteola* 15.3% of cultures and *Escherichia coli* 11.5%, *Klebsiella* group 47 7.6%. Their mechanisms of resistance were determined according to the phenotype reported in the anti microbiogram, showing a resistance to more than four families of antibiotics. The mortality rate was calculated at 19.3% cases in which the cause of death was directly related to the infectious process (rate: 0.7 deaths in 1000 egresses).

Conclusion: The isolation of MDR pathogens is not very common. However, they generate a high mortality/morbidity index and a great weight in our unit.

Recommendations: Reinforce the rational use of antibiotics program as well as the control of nosocomial infections so as to reduce their impact.

Biography

Guillermo Francisco Rosales Magallanes is the Head of Service of Infectology at Hospital Issstecali Mexicali in Baja California. Currently he is dedicated to the area of clinical research in the area of infections associated with health care.

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Challenges in the management of short stature

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Human growth is regulated by genetic, hormonal, nutritional and environmental factors that interact to culminate in a complex process of cell replication in all tissues. Short stature is defined as height below 3rd centile or less than two Standard Deviations (SDs) below the median height for that age and sex according to the population standard or even if the height is within the normal percentiles but growth velocity is consistently below 25th percentile over 6-12 months of observation. It is estimated that short stature to be around 3-5%. The prevalence of Growth Hormone Deficiency (GHD) is around 1 in 4,000. Evidence-based procedures, relating specifically to height screening for identification of short stature, auxological criteria for patient referral from primary to secondary pediatric care and general and endocrine investigations and diagnosis should be followed. The Guidelines for Growth Hormone and Insulin-Like Growth Factor-1 Treatment in Children and Adolescents. The rationale for treating short stature in childhood includes increasing height and alleviating psychosocial disability while maintaining favorable risk, benefit and cost, benefit ratios. Selection among management options may therefore depend on the degree to which each one meets these goals.

Biography

Nashwa Mohamed Baha Eddin has completed her MBBCh at Cairo University, Egypt in 1989 and Master's degree in Pediatrics from the same university in 1995. In 2005, she received her MD degree in Pediatric and Neonatal Medicine from Ain Shams University, Egypt. She worked as a Consultant Pediatric Endocrinology and Diabetes in Egyptian health insurance hospitals and in Cairo University Pediatric Hospital (CUPH-Abo El Rish). In 2006, she moved to UAE and continued her practice as Head of Pediatric Department in private hospitals in Abu Dhabi. She has participated in academic researches, in international and national conferences, and has gained clinical attachment with Wilford Hall Hospital, USA. Currently, she is a Member of the European Society for Pediatric Endocrinology, Egyptian Pediatric Association, Egyptian Society of Pediatric Endocrinology and Diabetes, Egyptian Obesity Association and Egyptian Society of Child Care Assistance to Young Diabetics.

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A study of knowledge, attitude and practice of children in and elementary school about using smart devices in Majmaah, KSA

Mansour Khater Alzahrani
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Introduction: Smart devices usage has increased among children recently. Young children are using smart devices anytime and anywhere, especially with the invention of smart phones and the replacement of desktop computers with digital tablets. With the rapid improvement advancement in smart devices, there is an explosion of electronic media games/education packages directed at preschool children in many societies.

Methodology: This is a cross-sectional study dealing with the knowledge, attitude and practices of children in elementary school about using smart devices in Majmaah city. It involves the use of a close ended self-questionnaire by the 231 participants between 7-12 years old analyzed by using the SPSS version 23.

Results: Majority of the participants 176 (76.2%) use smart devices for playing but very few 10 (4.3%) use them to help them studying. Majority of the parents strongly agree on that the devices have a negative effect on studying, sleeping, behavior (aggressiveness) and physical activities of their children. Only 22.5% of parents (52) are aware about risks of the smart devices. Children who playing game are not aware of its risks $p=0.012$. Children's attention significantly reduced after using of smart devices for two hours or more $p=0.041$.

Conclusion: Smart devices are widely available and regularly accessed by families and their elementary school children as an accepted part of daily life. This raises the need for parents to monitor their children's smart devices use to minimize potential health and development. Many issues were identified within this study including the negative impact of smart devices and the link between children's behavior and smart devices.

Biography

Mansour Khater Alzahrani is working as a Consultant and Associate Professor of Family Medicine in Saudi Arabia. Currently, he is the Chairman of the Medical Education Department in Dar Al Uloom University. He was the Vice Dean of the Academic Affair and the Chairman of Family Medicine Department for more than four years at Majmaah University. He has published more than 12 scientific papers in the field of family medicine. He was involved in teaching of different modules in the college with great input in the family medicine module. He is the Head and Member in multiple scientific committees.

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Neuro-NICU protecting neonatal brain health

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The impact of the NICU environment on the infant's developing brain became evident to health care providers since many decades. The intrauterine environment protects the developing fetus against harsh outside stimulation while providing a variety of tactile, vestibular, chemical, hormonal, auditory and visual sensory stimuli in an integrated, optimum fashion. In contrast, prematurely born neonates and even some term newborns, exposed to fluctuations in hemodynamic vitals, temperature, touch, vestibular, gustatory, olfaction, noise, light, oxygen and nutrients, which can be very harmful on the developing brain and may permanently alter normal brain development. Moreover, uneventful events during delivery or neonatal sepsis, IVH, HIE and other illnesses can do the same harm to the neonatal developing brain and negatively affect the neurodevelopmental outcome of the NICU graduates. The concept of Neuro-NICU have emerged mainly in USA over the past few years in an attempt to protect the developing neonatal brain to ensure normal neurodevelopmental growth.

Biography

Mahmoud Saleh Elhalik is the Head of Pediatric Department and Neonatology, a clinical governance theoretical and practical concepts for maintaining and improving the quality of patient care. All the element of Clinical Governance has been implemented in our department including: Education and Training, Clinical Audit, Clinical Effectiveness, promotion of high standard of quality of care, Risk Management, Research, Publication, continues unit Development through review and approval of new equipments and therapies provided in the NICU and the Pediatric Department.

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Special Session (Day 2)

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Simone Battibugli

The Children's Medical Centre, UAE

Improving motor function of children with cerebral palsy: What is the rational of early intervention?

Cerebral palsy is the result of a non-progressive lesion or injury to developing brain and has multiple causes and clinical manifestations, making a discussion on diagnosis and screening challenging. In the past, the diagnosis of cerebral palsy was largely a clinical diagnosis, with the development of imaging it has been recommended that clinical diagnosis of cerebral palsy should be confirmed by imaging. Although difficult, early diagnosis is extremely important as it provides opportunity early intervention. Recently, there is a renewed interest in qualitative assessment of general movements in newborns. This cost effective diagnostic tool consists of observing the infant's spontaneous movements with promising results providing high specificity and sensitivity. Poor control of muscles and movement in children with cerebral palsy can be associated with a wide range of functional challenges. Traditional efforts to manage these motor disabilities have been directed to improving tone and promoting adequate motor patterns. Contemporary approaches to treatment are addressing muscle weakness as a common element of functional problems with encouraging results. Brain and muscle plasticity in response to specific types of therapy has been demonstrated in CP. The amazing developmental changes of the brain between preterm age and the age of 1 year post-term offers opportunities for early intervention. The goal of motor training is to optimize the development of skilled motor function. Fixed contractures are managed by lengthening of the muscle-tendon unit by the technique that delivers the safest and most effective surgical technique that gives appropriate amount of lengthening of the muscle for the child in question. Given that cerebral palsy presents at early in infancy and persists throughout an individual's lifetime, the disorder needs to be thought of and managed in the context of development, functioning with a family based and community integration.

Biography

Simone Battibugli is currently working as Pediatric Orthopedic Surgeon at The Children's Medical Centre in Dubai. She has 10 years clinical and research experience as Faculty of Federal University of Sao Paulo. She has completed Pediatric Orthopedic Fellowship at Feinberg School of Medicine at Northwestern University, Children's Hospital, Chicago, USA and also as a Pediatric Orthopedic Fellowship at Shriners Hospital for Children, Lexington, USA. Her interests are in (1) Evidence based medicine (2) Systematic literature review (3) Management and clinical research on neuromuscular disorders; as cerebral palsy, spina bifida and arthrogryposis multiplex congenital and (4) Congenital foot and lower limb deformities and other congenital and acquired musculoskeletal pathologies in children.

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Young Researcher Forum

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Nurse-led central line initiative: Protecting patients from harm

Rui Wang

Children's Hospital of Philadelphia, USA

Staff nurses sought to shorten time to central line access for a vulnerable population. This harm prevention initiative included reducing injury from peripheral intravenous lines. Critically ill infants often require long term parenteral medications and nutrition. More consistent delivery, along with lowered risk of injury from PIVs are benefits of Peripherally Inserted Central Catheter (PICC) access for neonates. Many factors are related to timely line placement such as location of procedure; NIICU bedside versus interventional radiology, expertise of staff for insertion and patient safety. We sought to increase bedside PICC access as best practice. Ten experienced registered nurses in our NIICU were selected. The group completed required pediatric PICC qualification training to function independently. The team's objectives included shortening time to PICC placement, reducing patient harm by decreasing PIV extravasation and infiltrates and decreasing Central Line Associated Blood Stream Infections (CLABSIs), thereby contributing to decrease costs and shortened length of stay. Team leaders developed resources to facilitate communication and guide practice using a web-based community to improve efficiency and provide data collection tools to track outcomes; also creating an algorithm for PICC placement, annual competency for PICC team and a bedside PICC attempt job aid. Positive outcomes included: Decreased PICC waiting time, increased number of PICC lines placed at bedside versus patient transport to IR, limiting time delay and potential infant safety risks and significantly decreased in grade 3 and 4 PIV infiltrations. Based on positive outcomes of this nurse-led project, PICC team provides 24*7 care for NIICU patients.

Biography

Rui Wang is an experienced RN, worked in neonatal nursing field for 24 years. She has multiple certifications related to neonatal nursing, PICC RN, RNC-NIC, ECMO, SDU (special delivery unit RN), BRN (breastfeeding resource RN). She serves as a Clinical Resource Nurse for bedside nurses, clinicians and families. She has successfully placed close to 400 PICCs for neonatal patients; the smallest patient weighed 450 grams. She was named as one of NICU PICC RN team co-leaders since May 2016. She has created online community for PICC team in 2016, which serves as an efficient communication and data collection tool.

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Paediatric small bowel obstruction: A hairy case

Brianna Twomey
Geelong University Hospital, Australia

Introduction: Bezoars are collections of indigestible foreign material in the gastrointestinal tract that are further classified according to their composition.

Case Description: We report a case of a small bowel obstruction secondary to a trichobezoar in a 6 year-old-female requiring an emergency laparotomy and enterostomy.

Literature Review: A review of the literature was conducted to identify reports similar to our case. Data regarding clinical presentation, complications and management was extracted and evaluated.

Biography

Brianna Twomey is currently working in St. Vincent's Hospital, Melbourne, Australia.

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