

Clippings

□ National household Surveys often rely on parent's recall to assess children's use of health care services. However little is known about the accuracy of parental reporting of hospitalization and Emergency Department (ED) use. This study was undertaken to assess the agreement between maternal reported and medical record acute health care data for children younger than 3 years and to determine if agreement between the two varies by maternal characteristics. Data were obtained from the National evaluation of the Healthy steps for young children for 2937 families who completed parent interviews at 2 to 4 and 30 to 33 months and whose children's medical records were abstracted. It was found that absolute agreement was high for hospitalizations (> or = 90%) at both time points. It was high for ED use (>90%) only at 2 to 4 months. Beyond chance agreement was higher for hospitalizations than for ED use at 2 to 4 and 30 to 33 months. No differences were found by other maternal characteristics. Mothers have good recall for acute health care events during the first 3 years of their children's lives. *Arch Pediatric Adolesc Med* 2005; 159: 167-192.

□ Amblyopia is a common problem in children. In a randomized, multicenter (47 sites) clinical trial, 419 children younger than 7 years with amblyopia were assigned to receive either patching or atropine eye drops for 6 months. The main outcome measure was visual acuity in the amblyopic eye and sound eye after 2 years. Results showed that at 2 years, visual acuity in the amblyopic eye improved from baseline, a mean of 3.7 lines in the patching group and 3.6 lines in the atropine group. The difference in visual acuity between treatment

groups was small. It was concluded that atropine or patching for 6 months followed by best clinical care until 2 years produced similar improvement of moderate amblyopia in children between 3 and 7 years of age at enrollment. However on average the amblyopic eye acuity was still approximately 2 lines worse than the sound eye. *Arch Ophthalmol* 2005 Feb; 123:149-157.

□ Artemether is used for cerebral malaria in children. This study compared the efficacy and safety of rectal artemether with intravenous quinine in the treatment of cerebral malaria in children. One hundred and three children aged 6 months to 5 years with cerebral malaria were randomized to receive either intravenous quinine or rectal artemether for seven days. Time to clearance of parasites and fever; time to regain consciousness, starting oral intake and sitting unaided and adverse effects were noted. The difference in parasitological and clinical outcomes between rectal artemether and intravenous quinine did not reach significance. Mortality was higher in the quinine group than in the artemether group. No serious immediate adverse effects occurred. Rectal artemether is effective and well tolerated and could be used as treatment for cerebral malaria. *BMJ* 2005; 330: 334.

□ This study combined clinical risk factors with serum bilirubin levels to predict hyperbilirubinemia in newborns. The objectives were to validate a previously total serum bilirubin (TSB) levels of 25 mg/dl or higher and to combine a subset of this index with TSB levels measured at less than 48 hours to predict subsequent TSB levels of 20 mg/dl or higher. Of the 5706 newborns with TSB levels measured before 48 hours, 270 (4.7%)

developed a TSB level of 20 mg/dl or higher. Of these 254 (94%) had a TSB level at the 75th percentile or higher at less than 48 hours. The risk index improved prediction over the TSB level alone, largely owing to the effect of gestational age. For example for those with a TSB level at the 95th percentile or higher at less than 48 hours, the risk increased from 9% for newborns born at 40 weeks or more gestation to 42% for those born at 36 weeks. To conclude clinical risk factors significantly improved prediction of subsequent hyperbilirubinemia compared with early TSB levels alone, especially in those with early TBS levels above the 75th percentile. *Arch Pediatric Adolesc Med* 2005; 159: 113-119.

❑ Conventional interferon and lamivudine mono therapy are unsatisfactory in treating hepatitis B virus (HBV) infection. This study evaluated the efficacy and safety of pegylated interferon - alpha 2b and lamivudine combination therapy for chronic hepatitis B. One hundred patients with hepatitis B e antigen (HbeAg) positive chronic hepatitis B and moderately elevated alanine aminotransferase levels received either a staggered regimen of combination therapy with pegylated interferon - alpha 2b given for 32 weeks plus lamivudine 100 mg daily given for 52 weeks or lamivudine monotherapy given for 52 weeks. The rate of sustained virologic response was 36% for the combination treatment group and 14% for the lamivudine monotherapy group. End of treatment outcomes showed that compared with monotherapy, patients receiving combination therapy had more substantial reductions of HBV DNA and less often had lamivudine resistant mutants. The percentages of patients with normalization of alanine aminotransferase levels and histologic improvement did not differ. In patients with HbeAg positive chronic hepatitis B, staggered combination treatment with pegylated

interferon - alpha 2b and lamivudine may lead to a higher rate of virologic response than lamivudine monotherapy. *Ann Intern Med* 2005; 142: 240-250.

❑ Recent studies have shown an inverse association between the level of dietary calcium, particularly from dairy sources and body weight in adults; there is however a paucity of data regarding this relationship in children. Lifestyle and dietary habits were investigated by a questionnaire in 884 children. Milk consumption was pooled into four frequency categories: poor (< or = 1/week), moderate (>1 but < or = 5-6/week), regular (1/day) and high (> or = 2/d). The frequency of consumption of milk was inversely and significantly associated with age and sex-specific BMI z-scores by linear regression analysis, controlling for sex, age, physical activity, birthweight and parental overweight and education. This is the first report showing a significant inverse association between frequency of milk consumption and body mass in children. Regardless of the mechanisms involved, these results might encourage further research in this issue and might have important implications for the prevention of obesity. *Br J Nutr* 2005; 93: 15-19.

❑ Perinatal arterial ischemic stroke (PAS) is a common cause of hemiplegic cerebral palsy. Risk factors for this condition have not been clearly defined. This study determined the maternal and infant characteristics associated with PAS. The majority (85%) of infants with PAS were delivered at term. It was found that primiparity, fetal heart rate abnormality, emergency cesarean delivery, chorio-ammionitis, prolonged rupture of membranes, prolonged second stage of labor, vacuum extraction, cord abnormality, pre-eclampsia and oligohydramnios were more commonly associated with PAS. Risk factors independently associated with PAS on multivariate

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analysis were history of infertility, pre-eclampsia and chorioamnionitis. The rate of PAS increased dramatically when multiple risk factors were present. JAMA 2005; 293: 723-729.

□ This study evaluated an in house dot enzyme linked immunosorbent assay (ELISA) for confirmation of clinically suspected cases of tuberculous lymphadenitis (TBLN). Suspected cases of TBLN were prospectively enrolled. Fine needle aspiration was done of enlarged lymph nodes in all patients and 2 smears were prepared, 1 for acid fast bacillus (AFB) demonstration and the other for cytologic examination. The remaining material was

tested with in house dot - ELISA and by IS 6110 amplification with polymerase chain reaction (PCR) for diagnosis of TBLN. ELISA was more sensitive and detected 93.2% of cases. PCR and fine needle aspiration cytology (FNAC) detected 82.5% and 61.0% cases respectively. AFB positively was 33.1%. Application of dot - ELISA was more sensitive but less specific as compared to PCR. PCR through expensive should be used in problem cases because of its high specificity. Acta Cytol 2005; 49: 17-21.

K. Rajeshwari,
Associate Professor, Pediatrics,
Maulana Azad Medical College,
New Delhi 110002, India.