

16th World Congress on
Neonatal, Pediatric Nutrition & Baby Food

July 06-07, 2023 | Webinar





Pediatrics 2023



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Journal of Neonatal and Pediatric Medicine

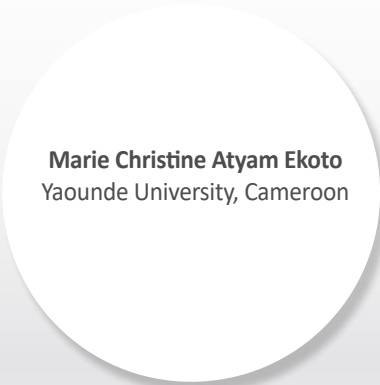




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**KEYNOTE
SESSIONS**



Marie Christine Atyam Ekoto
Yaounde University, Cameroon

Clinical, electrocardiographic aspects and echocardiographic structural and functional abnormalities of the heart during severe acute malnutrition in children from 6 months to 5 years of age in Yaoundé

Abstract

Introduction:

Malnutrition continues to be a significant health problem in developing countries like Cameroon. Impairment of the heart in children with severe acute malnutrition is not often taken into account, especially while taking care of them. Thus, at that moment many sudden deaths are noticed unfortunately. The aim of our study was to assess, clinically, by electrocardiogram and by ultrasound, structural and functional state of the heart in children from 6 months to 5 years of age, suffering from severe acute malnutrition in Yaoundé.

Methodology:

A transversal and descriptive study was carried out in 03 hospitals in the town of Yaoundé in Cameroon, for a period of 07 months, beginning from January to July 2015. We included all children hospitalized from 06 months to 05 years of age with severe acute malnutrition according to WHO criteria based on anthropometric parameters. Were excluded from the study, all very ill children presenting with severe anemia, shock, cardiac disease, known chronic illness (HIV, sickle cell anemia, diabetes, cancer).

After clinical evaluation, laboratories tests were made, including HIV test, glycemia, electrophoresis of hemoglobin, full blood count. Electro cardiograms and echo cardiograms were made for children retained for the study with an appropriate schedule.

Results:

From January to July 2015, we recruited 78 children, but excluded 41 of them and retained only 37. Infants of less than 18 months represented 81,08%. Boys were more than girls representing a ratio of 0,60. Maras represented 78,38% of cases.

Clinically, hypotension, bradycardia and alignment of refilling time were noticed respectively in 97,3%, 59,5% and 24,32% of cases.

By electrocardiogram sinus arrhythmia and alignment of QTS interval were found respectively in 3% and 50% of cases.

By echo cardiography, pericardial effusion, diminution left ventricular mass, diminution of thickness of posterior wall of left ventricle and diminution of thickness of septal wall in respectively 8%, 83,8%, 78,4% and 75,7% of cases.

Conclusion: Abnormalities of the heart exist in children with severe acute malnutrition in Yaoundé. To avoid cardiac failure and other heart complications, during the management of those children, it is very important to check up the cardiac structural and functional status.

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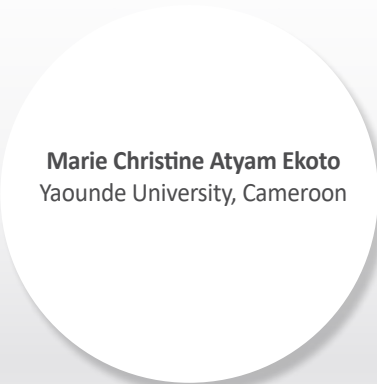
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Biography

Marie Christine was born in the eastern Chad town of Iriba in 1957. After secondary school, she studied law for one year at the University of N'Djamena, interrupting her studies to enroll in secretarial school in Yaoundé, Cameroon. She worked for several Chadian state agencies in Cameroon, including the civil service, and was later named the minister of Foreign Affairs at the embassy of Chad. His research interests are Respiratory tract infections and Acute malnutrition.

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**SCIENTIFIC TRACKS
& ABSTRACTS**



Khajik Sirob Yaqob Qazaryan
ZAKHO UNIVERSITY, Iraq

The clinical link of preschoolers' picky eating behavior with their Growth, Development, Nutritional Status, and Physical Activity in Iraq/Kurdistan region

Abstract

Background:

This study aimed to evaluate the prevalence of picky eating among preschoolers and to estimate the clinical association between eating behavior and growth, physical activity, development, and health status.

Aims:

The goal of this research study is to identify and find out the clinical impacts of picky eating behavior on preschoolers and children age schools in terms of their physical growth, neurodevelopment, nutrition and physical activity.

Methods:

In this study, a structured questionnaire was used to perform a cross-sectional descriptive study of 800 parents of preschoolers aged 2–4 years in Kurdistan/Iraq. Data collected included: demographics, food preferences, eating behavior, body weight, BMI, height, development, physical activity, and records of medical illness. Data from children defined as picky or non-picky eater's responses were analyzed and compared using standard statistical tests according to parental' questionnaire.

Results:

The mean age of the children was 2.85 years; among 800 participants, 620 (77%) were picky eaters. Compared with non-picky eaters 180 (23%), z-score of weight-for-age, height-for-age, and body mass index (BMI)-for-age in picky eaters was 0.91, 0.73, and 0.44 SD lower, respectively. There were significant variations of rates in the weight-for-age, height-for-age, and BMI-for-age percentiles <15, between picky and non-picky eaters ($P = 0.04, 0.023, \text{ and } 0.005$, respectively). Certain findings were higher in picky as compared to non-picky preschoolers including negative social communication such as afraid of unfamiliar places 65% vs 13.3%, afraid of being lonely 14.6% vs 12.1%, poor physical activity 36.8% vs 17.7%, learning disability 16.2% vs 7%, attention deficit 11.8% vs 4.3%, speech delay 4.6% vs 3.3%, respectively).

Conclusion:

The prevalence of picky eaters in preschool children was high, resulting in significant detrimental impacts on growth, nutritional status, development, physical activity, and health status.

Biography:

Khajik Sirob Yaqob Qazaryan, Department of pediatrics, child's nutrition, and growth, Zakho General Hospital. Specialist in child's nutrition, growth with interest in pediatrics neurology, MBChB, MA, FRCPC. Member of Kurdistan Pediatrics Society, Iraq. Full membership of ESPGHAN, Membership of American Dietetic Association, Member of Oxford University Hospitals. ASPEN full membership. Fussy eating, preschoolers, physical growth and neurodevelopment, physical activity, nutrition condition.

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To determine the ability of RAI (Renal Angina Index) in predicting AKI (Acute kidney injury) in patients in PICU

Abstract

Introduction:

Acute kidney injury (AKI) occurs in one fourth of the children admitted to pediatric intensive care unit (PICU). The rationale for the study is to check the ability of 'Renal Angina Index' (RAI) as a predictor of AKI for the early detection and management of AKI.

Methodology:

An observational study conducted on children, aged 1 month to 12 years, admitted in PICU of a rural tertiary care center, after ethical approval and informed consent. Patients with previous diagnosis of renal impairment were excluded. The RAI (day 0) was calculated at admission by multiplying risk group score and renal injury score along with serum creatinine levels on day 0 and estimated creatinine clearance (eCrCl) was calculated, which was correlated with the reference eCrCl as per age standards. The RAI ≥ 8 was considered positive and the proportion of children with positive RAI on day 0 developing AKI on day 3, AKI stage 2 or above as per KDIGO classification, was studied using appropriate statistical tools.

Results:

There were 27 children, with median age 18 months (IQR10, 48) enrolled, with a prevalence of AKI being 40.7% and the median day of onset of AKI being 2 days (IQR-2, 3). Twelve children's (44.4%) had positive RAI. Out of this, 10 cases (83.3%) developed AKI compared to only one patient (6.7%) of RAI negative cases. The sensitivity, specificity, positive predictive value (PPV) and negative predictive values (NPV) were 90.91%, 87.50%, 83.33% and 93.33%, respectively. The Receiver Operating Characteristic curve of Day 0 RAI ≥ 8 showed AUC of 0.87, which was better than AUC of serum creatinine on day 0 (i.e., 0.78).

Conclusion:

RAI on admission has a better predictive value for detection of AKI in children admitted in PICU.

Biography:

Pandey Amit Kumar, Department of Pediatrics is a member of Pravara Institute of Medical Sciences-DU, Loni. He is a Junior Resident. His research interests are Newborn Screening, Infant Nutrition, and Inborn Errors of Metabolism.

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Early Clinical Exposure in Medical Education: The Newborn Nursery Clinical Experience

Abstract

The Newborn Nursery Clinical Experience is an innovative, early exposure for medical students to the hospital setting and family medicine. Early in their second year, our medical students are immersed in the Newborn Nursery, while also experiencing the neonatal intensive care unit (NICU) and attending obstetrical deliveries. They witness, firsthand, the interprofessional and interdisciplinary workings of pediatricians, obstetricians, neonatologists, anesthesiologists, nurses, and other professionals. The medical students are also instructed on how to read a medical chart and on proper medical documentation and its importance. They also interact with the mother of the patient, as well as other family members that are in attendance, and long-term continuity of integrated care and the focus on the personal patient/patient's guardian(s) - physician relationship is stressed. This experience is always well received and highly evaluated by our medical students. It also helps to prepare them for their third-year clinical rotations in family medicine, pediatrics, and Ob/Gyn.

Biography

Dr. Peter Averkiou is a pediatrician and an Associate Professor of Pediatrics at the Charles E. Schmidt College of Medicine at Florida Atlantic University. He is the Co-Director of the four Foundations of Medicine Courses, the Director of the Service-Learning Projects, the Director of the Newborn Nursery Clinical Rotation and the Director of the Synthesis and Transition Course at the medical school.

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Peter Averkiou

Florida Atlantic University, United States

Pediatric Acute Renal Failure in Chad: Epidemiological, Clinical and Evolutionary Aspects

Abstract

Introduction:

Acute kidney injury (AKI) is a clinical syndrome characterized by a sudden and potentially reversible reduction in kidney function. It is an important cause of morbidity and mortality in sub-Saharan Africa. Our objective was to study the epidemiological, clinical, paraclinical, therapeutic and evolutionary aspects of acute renal failure in children at the Renaissance University Hospital Center and Mother and Child University Hospital in N'Djamena, Chad.

Methodology:

This was a descriptive and analytical cross-sectional study for six months from March to August 2020. All children aged 1-year to 15 years that were hospitalized in the emergency ward with acute renal failure defined by the KDIGO 2012 criteria were included in the study. The data were analyzed by Excel 2019 and SPSS 18.0 with significance ($p < 0.05$).

Results:

Thirty children were included in the study with a hospital prevalence of 0.56%. The mean age was 8.33 years with a sex ratio of 3.28. The average consultation time was 10.1 days. Vomiting was the main reason for consultation (46.7%). About 27% of patients had oligoanuria. There were 86% of the cases that were anemic, half of which were severe. Mean serum creatinine was 434.02 $\mu\text{mol/l}$ and the mean urea level was 26.86 mmol/l . Severe malaria was the main cause of AKI (33.3%). All patients suffering from malaria received antimalarials based on artemisinin derivatives. Intermittent hemodialysis was indicated in 22 patients (73.4%). The evolution was marked by a total recovery of renal function in 20 patients, 8 deaths and 2 transitions to chronic kidney disease. Deaths were statistically related to AKI severity, age range 1-5 years, femoral catheters and infections ($p < 0.0000$).

Conclusion: Acute kidney injury is an uncommon pathology in pediatrics and in Chad. It is often linked to severe malaria and has a high mortality rate.

Biography

Youssef Djidita Hagre Department of Emergency, Mother and Child University Hospital Center, N'Djamena, Chad. Studied at Faculty des Sciences de la Sante. His research interests are Acute kidney injury, Child Dialysis.

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