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RARE MENINGITIS IN INFANTS- TWO CASE REPORTS

G.M. Oliveira[1], A.P. Aguiar[1], M. Neves[1], F. Ferreira[2], D. Pinheiro[2], J. Rocha[3], A.D. Rainho[1]
[1]Department of Pediatrics [2]Microbiology, Hospital Pedro Hispano, Matosinhos
[3]Instituto Nacional de Saude Dr Ricardo Jorge, Lisbon, Portugal
gioliveira@portugalmail.pt

Bacterial meningitis is one of the potentially most serious infections in children. It is associated with high risk of acute complications and chronic morbidity. Documentation of the etiological agents is very important both for the appropriate antibiotic therapy and for prophylactic approaches. We report two rare cases of meningitis caused by agents from the Enterobacteriaceae family. The first case was a Salmonella Muenchen bacteraemia with meningitis in a six-week-old child admitted to emergency room due to high fever, irritability and feed refusal. The lumbar puncture revealed a cloudy cerebrospinal fluid with pleocytosis (WBC 4640/mm3), suggesting the diagnosis of bacterial meningitis. Treatment was started immediately with cefotaxime and (later) ampicillin, and continued for 28 days. Cultures of blood and cerebrospinal fluid were positive for S. Muenchen. The child general condition improved quickly, and so far no sequel has been seen. The second case describes an Enterobacter cloacae meningitis in a previously healthy eight-month-old girl referred to hospital with vomiting and high fever. Lumbar puncture revealed a turbid cerebrospinal fluid, containing 2490/mm3 WBC, and culture grew Enterobacter cloacae. No bacteria was isolated from blood. Outcome was favourable after 21 days of therapy with ceftriaxone. To our knowledge, this is an exceptional description of Enterobacter cloacae meningitis. Besides reporting these two rare causes of bacterial meningitis, we pretend to emphasize the critical role of lumbar puncture and microbiological laboratory in the early identification of the causative bacteria. Early diagnosis and the use of appropriate antibiotics are of crucial importance in meningitis.