PLACE OF SEMI-QUANTITATIVE PROCALCITONIN (PCT.Q) IN EMERGENCY PEDIATRICS UNIT

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More half of the medical reasons for consultation to the paediatric urgencies are represented by feverish states of viral origin or bacterienne. Choice of the best marker of the ignition in urgency and with the urgencies in front of a feverish state is not established yet, it is necessary to underline it should be stressed that the clinical evaluation remains irreplaceable. The principal markers of the ignition used with the urgencies are NFS with its leucocytic formula, CRP, and recently PCT. Until to evaluate the quality of these various markers of the ignition for the diagnosis of the bacterial infection, we have, with the fast kit of diagnosis of the semi-quantitative procalcitonine (PCT.Q)to laboratories B.R.A.M.S, which been able to carry out an exploratory study in 2002 and whose results are as follows: 200 assessments including 198 exploitable:NFS, CRP, PCT.Q, and PCT proportioned with The PCT.Q made with the bed of the patient is more specific infection bacterienne and constitutes a decisif examination for the hospitalization and its assumption of responsibility of the patient compared to other markers: NFS and CRP.