URINE TRACT INFECTION IN INFANTS YOUNGER THAN EIGHT WEEKS OLD

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Background: Urinary tract infection is a common clinical problem in infants. It presents certain peculiarities compared with other pediatric age groups. Methods: We studied 45 infants younger than 8 weeks old who had urine tract infection and admitted to our hospital during period January 2001 to December 2002. Diagnosis was confirmed by positive urine culture. All urine specimens obtained by suprabubic aspiration. Clinical presentation, laboratory data, imaging studies and therapy were reviewed. Results: Thirty-nine of these patients were males(87%). The most frequent symptom was fever (60%). Other clinical manifestations were: weight loss (11,1%), failure to thrive(11,1%), vomiting(8,8%), diarrhea(4,4%) and jaundice(4,4%). Isolated included Escherichia coli(56%). Klebsiella pneumoniae(27%). microorganisms Enterobacter cloacae(15%) and proteus(2%). Abnormal urinalysis results were noted in 64% of infants. Leucocytosis, high C-reactive protein concentration and elevated erythrocyte sedimentation were noted in 42%, 58% and 40% respectively. 20 infants had abnormal renal ultrasound results(44%). In all cases intravenous treatment with a combination of ampicillin or cephalosporin and aminoglycoside was efficient. Voiding cystourethrogram detected vesicoureteral reflux in 12 infants(27%). Renal scanning revealed scarring in 4,4%. Conclusion: High awareness, accurate diagnosis and prompt management of urine tract infection in infants can prevent serious complications and preserve renal function.