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Intestinal infections in pediatric age group; a real surgical emergency

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It's well known that the principle function of the gastrointestinal tract is to digest, absorb and propel food material along its length. Most intestinal infections will interfere with these functions. The symptoms might be simple as nausea, vomiting, bloating and abdominal pain or severe with features of intestinal obstruction and perforation. Hereby, I am presenting three cases of intestinal infection with severe impact on the patient's life: 6-years old boy referred as a case of intestinal obstruction and peritonitis at laparotomy showed intestinal schistosomiasis; 11-years old girl admitted with history of fever and vomiting for 3 days duration with lethargy for 2-weeks prior to her admission. On day-7, started to pass frank blood and hypotension with state of shock. After resuscitation laparotomy revealed intestinal tuberculosis; 1-year old male who was previously healthy presented with abdominal pain, pyrexia and diarrhea. He deteriorated rapidly with necrotizing bowel disease and perianal ulceration requiring aggressive surgical intervention and massive bowel resection and diagnosed as community acquired pseudomonas infection with bowel involvement.

Result: Intestinal schistosomiasis is not suspected as an underlying case of intestinal obstructions, therefore it's recommended that in endemic areas, clinicians and surgeons to consider it as a differential diagnosis of intestinal obstruction; intestinal tuberculosis is considered rare in children, though having high mortality and morbidity if misdiagnosed; a high index of clinical suspicion is mandatory for early diagnosis of *Pseudomonas aeruginosa* gastro-intestinal infection, early diagnosis and treatment may improve prognosis.

Biography

Diary Abdul Rahman is a Consultant Pediatric Surgeon and the Head of Prevention and Control of Infection at Latifa Hospital DHA, Dubai, UAE.

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