

influenzae (73), *M. catarrhalis* (56) and *Acinetobacter* (16). Interpretive criteria were those of the US-FDA as published in the product package insert.

Results: Tigecycline MIC₅₀ and susceptibility rates among species were identical between sampled years and more potent than either tetracycline or minocycline. The MIC₉₀ range (mg/L)/% susceptible for ENT was 0.25–4/36–100 with lowest potency noted against *Proteae*. Amp-C (19–46%) and ESBL strains (4–12%) were tigecycline-susceptible (≤ 2 mg/L). Only 2 (*E. faecalis*) Gram-positive cocci (GPC; 0.3%) were tigecycline-non-susceptible at 2 mg/L. The MRSA and MR-coagulase-negative staphylococcal rates were 67 and 84%. No vancomycin-resistant enterococci and only one VISA strain was detected. *H. influenzae* (MIC₉₀, 0.5 mg/L; 40% B β -lactamase-negative ampicillin-resistant) and *M. catarrhalis* (MIC₉₀, 0.25 mg/L) were inhibited by tigecycline, as were all *Acinetobacters* strains at ≤ 4 mg/L (bimodal MIC distribution). Tigecycline was not active against *P. aeruginosa* (MIC₉₀, 32 mg/L).

Conclusions: Using US-FDA breakpoints, tigecycline-resistant rates among Japanese isolates were nil for Enterobacteriaceae and only 0.3% for GPC. Tigecycline appears to be active against current pathogens from Japan including prevalent resistance phenotypes (extended-spectrum β -lactamases, MRSA, penicillin-resistant pneumococci).

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Mumps in 123 Iranian children

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Keywords: Mumps; Children; Complication

Background: Mumps is a viral infection primarily affecting the salivary glands. Although disease is usually mild and self-limited, but some patients suffering from mumps admit due to complication like meningitis, pancreatitis, orchitis, and encephalitis. In the countries where there is no vaccination for mumps the incidence is high with epidemic peaks of every 2–5 years. The aim of this study was to describe the demographic and clinical features of mumps in Iranian children.

Methods: this study was conducted for cases of mumps treated at Pediatric Department of Ali-ebn Abitaleb Hospital, in Rafsanjan, Iran in 2002.

123 patients aged 1–14 years were studied. The data collected through standard history and physical examination of patients at the beginning and the end of treatment, 9 patients did not agree to participate in this study.

Results: 123 patients with mumps were studied 120 children (97%) with affected salivary glands were detected on the day of admission. 81 (66%) were male 66 (54%) of case were in the age group of 5–9 years old, and 32% (40) in the age group of 10–14 years, 14% (17) 1–4 years. CNS manifestation was diagnosed in 27 (22%) of cases, pancreatitis

of patients. Mumps related complications occurred between the fourth and seventh day after the appearance of salivary gland involvement ($4.23 \pm .67$).

Dehydration was diagnosed in 37% of the cases at time of admission. All the patients who hospitalized were well going.

Conclusion: although this was an actual epidemiologic problem in Iran up to 2002, since then mumps vaccination program is being done for Iranian children and the epidemic periods have not been seen that was an end to epidemic period of mumps in Iran.

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Invasive Hib Disease - Is It a Problem for India?

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Background: The preliminary part of a vaccine probe study designed to estimate the preventable burden of Haemophilus Influenza related severe illness in young children in India provided sufficient data to estimate the burden of disease due to meningitis and pneumonia in this population. The study did not proceed to the probe trial as randomization was not considered ethical following WHO recommendation that the vaccine be introduced. We present findings of the preliminary part of this study at the Vellore site.

Methods: A cohort of 5107 children (4226.6 child years) was followed up to the age of two from one administrative block in Tamil Nadu between July 2005 and January 2007. Hospitalization at study hospitals was documented by study personnel. While no active surveillance for morbidity was undertaken at the community, study personnel, during fortnightly home visits, encouraged parents to utilize study hospitals for healthcare. The hospital component of the study included all admissions during the study period from the cohort as well as non cohort admissions to study hospitals with severe pneumonia or meningitis in the study age group.

Results: There were 131 episodes of hospitalized severe clinical pneumonia in the cohort (Incidence - 31 per 1000 child-years (26–36.9)) and 2 cases of purulent meningitis (Incidence - 46/100,000 child-years (5.73–170.85)). The hospital study recruited 457 children with severe pneumonia and 37 with purulent meningitis. Of those with purulent meningitis, 12 (32.4%) tested positive for Hib, 6 (16.2%) for Pneumococci and 2 (5.4%) for other organisms. 70 cases of severe pneumonia (53%) from the cohort had a readable chest radiograph. 18 (25.7%) of these had primary consolidation. With conservative assumptions we estimate the incidence of severe pneumonia with radiologic endpoint to be 5.7 per 1000 child-years

Conclusions: Extrapolating information from hospital study to the cohort suggests that the rates of invasive Hib disease are consistent with global estimates.

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