

**Results:** Of 284 cases with Zoster 67 (23.59%) were opportunistic forms of its unrelated with HIV.

From them 60.87% were male and 39.13% female.

Cases according to ages: 14-20 years old 2, 21-30 years old 13, 31-40 years old 14, 41-50 years old 9, 51-60 years old 12, 61-70 years old 15, 71 years old and over 7 cases.

Distribution based on season: 19 in spring, 16 in summer, 17 in fall and 15 in winter.

Immunosuppressive causes:

- infectious in 6 cases: visceral *leishmaniasis* 3, TB 3 (pulmonary 2, meningitis 1);
- non infectious in 61 cases: tumors 25 (stomach-3, intestinal-2, liver-3, kidney-2, lungs-4, ovarian-2, breast-7, prostate-1, cervix-1), lymphoma 8 (Hodgkin 3, non Hodgkin 5), leukemia 2 (chronic myeloid -1, hair cell leukemia-1); aplastic anemia-2; cholangitis 6 (SLE-2, RA- 4), immunodeficiens mixte 1; post transplanted condition 3 (kidney-2, mielotransplant-1); chronic pathologies 9 (arcoïdosis-1, diabetes mellitus-3, hepatic cirrhosis-1, chronic renal insufficiency -1, cardiac insufficiency- 2 ,celiac diseases-1); immunosuppressive therapy 5

#### Conclusion:

- a. Opportunistic Zoster unrelated with HIV was encountered in 23.59%.
- b. Appeared often on males, 60.8% and ages 21 - 70 years old, 89.13%.
- c. Noticed 29 conditions factor : 3 infectious, 14 tumors, 3 immune, 1 drugs, 2 after transplant, 6 in chronic pathologies.
- d. In 26.86% of cases, zoster preceded unknown tumoral disease.

<http://dx.doi.org/10.1016/j.ijid.2012.05.226>

#### Type: Poster Presentation

Final Abstract Number: 40.065

Session: *Virology and Viral Infections (Non-HIV)*

Date: Thursday, June 14, 2012

Time: 12:45-14:15

Room: *Poster & Exhibition Area*

#### Predictors of duration and degree of third space fluid accumulation in adult patients with dengue

R. Premaratna<sup>1</sup>, A. Ragupathy<sup>2</sup>, N. Miththinda<sup>2,\*</sup>, J. de Silva<sup>1</sup>

<sup>1</sup> Faculty of Medicine University of Kelaniya, Ragama, Sri Lanka

<sup>2</sup> Colombo North Teaching Hospital, Ragama, Sri Lanka

**Background:** Fluid leakage is the hallmark of dengue shock syndrome. It is important to identify clinical and biochemical parameters which predict duration and degree of fluid leakage in dengue.

**Methods:** 102 patients with confirmed dengue were prospectively followed up for clinical, haematological and biochemical parameters, and those were correlated with ultrasonographic evidence of third space fluid accumulation (TSFA).

**Results:** Of the 102 patients (52 males; mean age 28.3 years (SD 11.8), TSFA was detected in 34/95(36%) after hospital admission; 33/95 had pleural effusions which included all except one of 21/95 who had ascites. The majority of pleural effusions (72.7%) lasted 3 or more days and in most cases (52.4%) ascites lasted less than 3 days.

logue scale ( $r=0.523$ ,  $p=0.001$ ), maximum percentage rise of PCV ( $r=0.526$ ,  $p=0.001$ ) and maximum percentage rise of Hb ( $r=0.525$ ,  $p=0.001$ ). It was negatively correlated with WBC count ( $r= -0.361$ ,  $p=0.020$ ) and platelet count ( $r= -0.585$ ,  $p=0.000$ ). There was no correlation with admission weight ( $p=0.125$ ), duration of fever ( $p=0.387$ ), lowest pulse pressure ( $p=0.299$ ), ALT( $p=0.241$ ), AST( $p=0.328$ ), average fluid intake per day ( $p=0.118$ ) and fluid balance per day ( $p=0.129$ ).

The mean lowest WBC count of 3005/mm<sup>3</sup> that was recorded for patients who developed bilateral pleural effusions ( $n=21$ ) was significantly less ( $p=0.042$ ) than the mean lowest WBC count of 4091/mm<sup>3</sup> that was detected for unilateral effusions ( $n=12$ ). There was no significant difference in other parameters between these 2 groups.

Duration of ascites was significantly positively correlated with highest AST ( $r=0.598$ ,  $p=0.002$ ) and highest ALT ( $r=0.721$ ,  $p=0.000$ ).

**Conclusion:** Severity of body aches on detecting effusions, maximum percentage rise of Hb and PCV, lower WBC and platelet counts seem to be associated with longer periods of TSFA. Among these, lower WBC counts appear to be more predictive of the degree of fluid leakage. Higher ALT and AST levels seem to be useful in predicting the duration of ascites.

<http://dx.doi.org/10.1016/j.ijid.2012.05.227>

#### Type: Poster Presentation

Final Abstract Number: 40.066

Session: *Virology and Viral Infections (Non-HIV)*

Date: Thursday, June 14, 2012

Time: 12:45-14:15

Room: *Poster & Exhibition Area*

#### The epidemiology of hepatitis C virus in Egypt: a systematic review

Y. Mohamoud\*, G. Mumtaz, L. Abu-Raddad

Weill Cornell Medical College in Qatar, Doha, Qatar

**Background:** Egypt has the highest prevalence of hepatitis C virus (HCV) in the world, estimated nationally at 14.7%. This nation has weathered the largest iatrogenic transmission epidemic of blood-borne pathogens in human history during the era of parenteral antischistosomal therapy (PAT). Numerous HCV prevalence studies have published various estimates from different Egyptian communities, suggesting that Egypt, relative to the other nations of the world, might be experiencing intense ongoing HCV transmission. This review's objective was to delineate the evidence on the epidemiology of HCV transmission among the different at risk population groups.

**Methods:** This was a systematic review following the PRISMA guidelines of all data on HCV transmission in Egypt. Sources of data included PubMed, Embase, international organizations' reports and databases, and country-level reports and databases.

**Results:** Five studies have measured HCV incidence in Egypt. HCV incidence among village residents ranged between 2.4/1,000 person-years and 5.2/1,000 person-years. On the other hand, 130 studies have measured HCV prevalence among populations at varying levels of risk. Among Egypt's general population, HCV prevalence in pregnant women was as high as 15.8%, and among blood donors it ranged between 9.0% and 24.8%. A national survey recently measured an overall prevalence of 14.7%. Among populations at direct risk of exposure, HCV prevalence was found to be