

inclusion conjunctivitis, the ocular component of Chlamydial infection is now known to be only one component of a more generalized infection which may play a role in infant morbidity.

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**PP-175** Transmission patterns of *Trichomonas vaginalis* among women population in Khartoum State

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**Objectives:** A study was carried out from January 2008 to December 2008 to determine the transmission patterns of such infection (prevalence and incidence) of trichomoniasis at two different localities in Khartoum State (urban and rural area).

**Methods:** A standardized questionnaire and all the subjects were followed by pelvic examination. Some of these samples were taken for follow up study (incidence) and examinations of both samples by wet mount preparation. The study was consisted routine monthly prevalence carried to find out the risk factors related with trichomoniasis.

**Results:** The present study found that 12.0% (297) out of 2473 were identified of Sudanese women presenting to Ombadda and Ibrahim Malik hospitals were infected with trichomoniasis, no significant difference in the prevalence the distribution of urino-genital trichomoniasis in Ombadda and Ibrahim Malik Hospital ( $P > 0.05$ ). In Alsalam administration unit gave the highest infection 75 (3.0%) with significant rate ( $P < 0.05$ ), the highest infection between age group 20-24 years old was recorded among Sudanese women ( $P > 0.05$ ), the highest numbers of infections were observed in October 49 (2.0%), Statistical analysis showed significant difference in the prevalence of infection monthly ( $P < 0.05$ ), the highest infection 187 (7.6%) was observed among the married and this result was significant with respect to marital status ( $P < 0.05$ ), *T. vaginalis* is higher common in non pregnant women than pregnant ( $P < 0.05$ ), raise temperatures of water effect in viability of *T. vaginalis* ( $P < 0.05$ ). The fumigation gave more effects in the parasite ( $P < 0.05$ ).

Incidence study for selected infected women (17 patients); the incidence rates turn down to zero infection after 2 months (5.8%); however after one month most the infected patient were treated for infection (11.8%).

**Conclusion:** Increased prevalence of *Trichomonas vaginalis* infection (12%) could also reflect lack of access to care and distrust of the health-care system; therefore, more efforts should be taken to control the problem.

Other risk factors was determined such as the temperatures of water, fumigations and symptoms related with transmissions of *Trichomonas vaginalis*, new effective strategies are needed to combat this infection.

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**PP-176** Determination of HLA pattern in paralytic poliomyelitis

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**Introduction:** Poliomyelitis is a common viral infection. Little is known about the factors which determine the neuron-susceptibility of an individual to poliovirus but it is suggested that these factors are under genetic control, this has been supported by the demonstration of a

possible association between the HLA antigens and paralytic Poliomyelitis.

**Aim:** Determine any possible association between Spinal Poliomyelitis and HLA system.

**Subjects and Methods:** The study was conducted on 20 children (12 boys, 8 girls). Their ages ranged from 5-24 months. These children attended the out-patient clinic of El-Shatby University children's Hospital of Alexandria with clinical picture of paralytic Poliomyelitis of at least one month duration. A control group consisted of 100 healthy age matched children. HLA typing was performed using the two stages lymphocytotoxicity micromethod.

**Results:** The relative risk (RR) of HLA-A10 was 5.70 (15% in patients versus 3% in controls). The chi-square ( $X^2$ ) was 5.05. This corresponds to a P value of 0.025. As we tested 25 antigens, the corrected P ( $P_c$ ) =  $25 \times 0.025 = 0.625$ . This value being more than 0.05 is not significant. The RR of HLA-Aw19 was 3.94 (35% in patients versus 12% in Controls).  $X^2 = 6.61$ ,  $P = 0.025$ ,  $P_c = 0.625$ , which is not significant. HLA-B15, -B16, -B18, and -B42 are entirely absent among patients. The RR of homozygosity at the -A locus was 0.09 (10% in patients versus 54% in controls).  $X^2 = 12.96$  this corresponds to P value of less than 0.05 (i.e. significant).

**Conclusion:** The results are in favour of the view that susceptibility to paralytic Poliomyelitis is not influenced by the possession of any particular HLA-A or -B antigens. The results indicate that homozygosity at the -A locus and the possession of certain HLA-B antigens might play role in the protection against the development of Spinal Poliomyelitis.

**PP-177** Profile of organisms isolated from blood cultures in neonatal intensive care unit and their resistance pattern

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**Background:** Neonatal sepsis is a low incidence, high-risk disease with many sepsis work-ups performed to detect a single case. Early diagnosis is very important to reduce morbidity and mortality and requires awareness of risk factors particularly in low birth weight (LBW) neonates. Because sepsis may manifest with nonspecific clinical signs and its effects may be devastating, rapid empiric antibiotic therapy is recommended and antibiotics are later adjusted according to sensitivity pattern. This study was conducted to determine the profile of organisms isolated from blood cultures in neonatal intensive care unit (NICU) and their antibiotic susceptibility pattern for the last one year.

**Methods:** This is a retrospective study conducted from June 2008 to May 2009 in Hospital Universiti Sains Malaysia (HUSM), Malaysia. Data on specimens requested for blood culture and sensitivity were collected. Antimicrobial susceptibility was determined using disc diffusion method and interpreted according to Clinical and Laboratory Standard Institute (CLSI). Data were analyzed and presented as descriptive statistic.

**Results:** A total of 221 blood culture specimens were positive. Gram-positive organisms were isolated in 54% of cases followed by Gram-negative and fungus in 40% and 6% respectively. The most predominant isolates were Coagulase-negative staphylococci (CoNS) (37%), *Klebsiella pneumoniae* (14%), *Pseudomonas aeruginosa* (7%), *Enterococcus* sp (5%) and *Streptococcus* group B (5%). Majority of CoNS (78.8%) showed resistance to methicillin. There were no methicillin resistance *Staphylococcus aureus* (MRSA) or extended spectrum  $\beta$ -lactamase (ESBL) isolated.

**Conclusion:** CoNS were the predominant bacterial isolates from blood specimens in NICU. The significance of their