MASSIVE LOBAR PNEUMONIA IN ONE YEAR OLD GIRL

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ABSTRACT

Introduction: Pneumonia is a significant cause of childhood morbidity and mortality in the whole world. With approximately 158 million episodes of pneumonia annually, of which 154 million are in developing countries, it is estimated that pneumonia causes approximately 3 million deaths, or about 29% of all deaths, among children younger than 5 years around the world.

Aim: to present a case of massive right lobar pneumonia

Matherial and Methods: one year old girl, seven days with cough and difficult breathing. At admition febrile 38,7 C tachydispinoic, pale, dehydrated. O2 sat = 97-99%. Pharynx hyperemic. Nose with purulent secretion. Pulmo - bronchial breathing to the right in upper and middle parties and finding of small wet crackles and squeaky murmurs. Rest of the phisical examination was normal. Laboratory findings: Le-19.84(Gran.- 90.8%), Hb- 82 g/L, CRP> 320 mg / l. Pneumoslide: IgM + for mycoplasma, adenovirus, parainfluenza and influenza. Chest X ray - right in the apical and middle parties completely reduced pulmonary transparency. The child was treated with Amp. Cefotaxime and Amp. Amikacin for 10 days, Azithromycin for 6 days, and inhalations with a bronchodilatator.

Results: Child was discharged afebrile with progressive withdrawal of lung auscultatory findings and a satisfactory regression of changes in control chest x ray. After being discharged from hospital with another two hospitalizations due to bronchopneumonia, after that she was set to Spray Flixotide. Skin tests (ST) of nutritive allergens with a light milk reaction. Bronchoscopic finding of inflamed, oedematous and hyperemic arytenoids of the larynx that may accompany aspiration syndrome. It is planned to implement ST of inhaled allergens.

Conclusion: Lower respiratory tract infections are common in childhood and are usually treated outpatient, less frequent repetitive localized lower respiratory infections may result from a foreign body or aspiration syndrome.