OMICS Group Conferences
Accelerating Scientific Discovery

2nd International Conference on
Clinical & Cellular Immunology
October 15-17, 2013 Hampton Inn Tropicana, Las Vegas, NV, USA

Clindamycin in treatment of lung abscess in children

Md. Atiar Rahman
Bangabandhu Sheikh Mujib Medical University, Bangladesh

Background and Aims: Children with a lung abscess usually do well with antibiotics alone and surgical intervention is rarely needed. There are no clear guidelines about the duration of antibiotic treatment. Standard practice in treating lung abscess is to use parenteral antibiotics until clinical symptoms abate and to follow with oral antibiotics for up to six weeks. The objective of this study was to observe and compare outcome, duration of antimicrobial treatment for lung abscess

Methods: A prospective open, randomized clinical trial was conducted among 30 children aged 5 to 15 years with lung abscess and sequential antibiotic therapy either clindamycin (group 1; n=15) or ceftriaxone, flucloxacillin plus metronidazole (group 2; n =15) were administered until complete resolution of clinical and radiological abnormalities.

Results: Mean age was 11.5 years in group 1 and 11 years in group 2. Blood culture was negative in all cases but in sputum 33% cases *Staphylococcus aureus*, 20% cases *Streptococcus pneumoniae* were found and was sensitive to clindamycin, flucloxacillin and ceftriaxone. Anaerobe culture could not be done due to lack of facilities. ESR exceeded 20 mm/hour in 94% and CRP exceeded 20 mg/L in 95% of the cases. ESR became normal in 21 days and CRP in 10 days and the cavity size on chest radiography was reduced after two weeks of treatment in first group but in second group CRP in 15 days, ESR in 28 days and reduced cavity in four weeks. Mean duration of therapy was 3 weeks for first group and 5 .6 weeks in second group. There were significant differences between the duration of treatment and outcome of the two groups ($P< 0.05$.

Conclusions: Clindamycin appears to be effective short course treatment option in lung abscess.

Author Keywords: Clindamycin, treatment, lung abscess and children

Biography

Md. Atiar Rahman has completed his M.D. in Pediatrics from Bangabandhu Sheikh Mujib Medical University (BSMMU), Dhaka, Bangladesh and fellowship in Pediatrics in 2008 from BCPS. He had also an opportunity to receive fellowship training in Pediatric Respiratory Medicine from Great Ormond Street Hospital for Children, London. UK and Italy. He is associate Professor of Pediatric Pulmonology, Department of Pediatrics of BSMMU. He has published more than 11 papers in reputed journals and serving as a reviewer of reputed international journals.

atiar777@yahoo.com