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Pitfalls in the diagnosis of skeletal tuberculosis in children

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C keletal tuberculosis in children can easily be missed due to their non specific presentations. The objective of our study is to review Othe varied presentation, pitfalls in the diagnosis of pediatric skeletal tuberculosis and treatment outcome. A retrospective review of children was diagnosed with skeletal tuberculosis over a period of 3 years. A total of 19 cases were reviewed. Mean age was 5.6 years. Average duration of symptoms was 6 months with chronic pain being the most common. Spine was the commonest site. Most of the cases were missed due to non specific presentation, hence delaying the diagnosis. Contact history was positive in 6 and ESR was elevated in majority of them. Diagnosis was confirmed radiologically, bacteriologically or histopathologically. All children were treated with anti tubercular drugs and surgical debridement with good prognosis. A high index of suspicion aided by confirmation using imaging or histopathology can help in early diagnosis. Treatment with anti tubercular drugs with surgical debridement has good prognosis.

Biography

Janani Sankar is a Senior Consultant in the Department of Pediatrics at a Tertiary Care Children Hospital in South India. She has around 40 publications in Indexed National & International Journals. Her areas of interest include, Pediatric Infections, Hematology & Critical Care.

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