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**Accuracy of absolute neutrophil count as a screening test for urinary tract infection among pediatric patients age 2 to 24 months****Ma Lizette G Lazo**

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Accuracy of absolute neutrophil count as a screening test for urinary tract infection among pediatric patients age 2 to 24 months: Is a cross-sectional criterion study, conducted in a tertiary hospital located in a provincial state. The main objective is to determine the accuracy of Absolute Neutrophil Count in diagnosing Urinary Tract Infection among Pediatric patients between the ages of 2 – 24 months. A total of 168 patients were studied. Group 1 had positive growth (97 patients) and group 2 had negative growth (71 patients). Diagnostic accuracy of ANC was evaluated thru determination of sensitivity, specificity, positive and negative likelihood ratio at 95% confidence interval. Confounding variables (pyuria, hematuria, bacteriuria) was correlated with ANC in diagnosis of UTI. Majority of patients diagnosed with UTI were aged 2 – 6 months, with slight female predominance. Chief complaints were fever, vomiting, diarrhea, dysuria and seizure. Associated symptoms were poor feeding and irritability. Pyuria and bacteriuria were mostly seen, and only 1 patient had hematuria. Hematologic profile showed leukocytosis, increased segmenter counts and lymphocytosis. Band cells were found only in 80 (47.62%) patients. This study showed increased in the specificity of ANC when combined with pyuria and bacteriuria and a 100% specificity of ANC when combined with hematuria. However, the sensitivity and diagnostic accuracy of ANC and all other confounding variables were low. Absolute neutrophil count alone cannot be used as a screening test for diagnosing UTI in young children because of its low diagnostic accuracy even when combined with other variables such as pyuria, hematuria & bacteriuria. Hence, urine culture should remain as the gold standard in diagnosis of UTI among febrile patients ages 2 – 24 months.

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