

### 3 VERSUS 7-DAYS INFLUENZA PROPHYLAXIS IN CHILDREN

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**Background:** Routine influenza prophylaxis in children lasts longer than influenza treatment (7-10 days). In this randomized controlled trial, we aimed to compare efficacy, safety, and costs of 3 versus 7-days prophylaxis with oral oseltamivir in children hospitalized.

**Material and methods:** 45 patients aged 13 days-14 years were randomly allocated in 3 (21 patients) or 7-days (24 patients) prophylaxis group.

**Results:** The efficacy of prophylaxis was 100% in 3-days group compared to 95.8% in 7-days group (prophylaxis failed in one patient after 6 days). 2 patients stopped the study due to adverse effects (AEs), 1 in each group, after day 2 and 4, respectively. AEs were observed in 38% of patients (17/45), more frequently in 7-days group (45.8% vs. 28.6%, 11/24 vs. 6/21) and required 13 vs. 10 medical interventions. The most frequent AE was vomiting/nausea (29.2% vs. 14.3%), followed by behavioral changes (8.3% vs. 14.3%), skin disorders (4.2% vs. 9.5%), and sleep problems (0% vs 9.5%). 4 patients (2 in each group) presented AEs in more than one system. The direct costs of shorter prophylaxis are 57% lower, while costs of additional medical intervention related to AEs are 23% lower.

**Conclusions:** This preliminary report shows that 3-days influenza prophylaxis may be as efficient as the longer course, but substantially reduces the number of AEs and costs related both to drug costs and medical interventions.