CLINICAL FEATURES AND OUTCOMES OF INFLUENZA A (H1N1) PDM2009 AND B IN CHILDREN

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Background: Influenza viruses are an important cause of disease of varying severity in humans. Complications of influenza may occur at any age, affecting mostly infants and children. The aim of the study was to describe the course of influenza among children aged 0-59 months. Material and methods: The total number of 150 children with influenza-like symptoms (ILI): cough, fever > 37,8°C, sore throat was included into the observation. All children were tested with both rapid influenza detection test (RIDT) BD Directigen™ EZ Flu A+B® and RT-PCR. **Results:** The total number of 64 cases of influenza was diagnosed (attack rate 40%): 19 (30%) cases of influenza caused by virus type B and 45 (70%) cases of influenza caused by type A virus. Children with influenza required more often follow up visits (p < 0,05, OR 1,99, 95%CI 1,03-3,85) and less often were administrated antibiotic therapy (p < 0,05, OR 0,25, 95%CI 0,044-0,97). The logistic regression analysis revealed that only positive result of rapid influenza detection test, not any of clinical symptoms, could be found as the independent predictor of influenza (OR 4,37, 95%CI 2,03-9,43). Patients with influenza type A more often reported muscle ache (p < 0,05) and complications (p < 0,05; OR 6,06, 95%CI 1,2-60,38). Otits media occurred more often among patients with than without influenza (p < 0.01), OR 15.5 95% CI 2.1-688,5). **Conclusions:** Our results indicate that although influenza infections among children younger than 59 months were generally mild and self-limited, paediatric burden o the disease was significant.

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