CHLAMYDOPHILA PNEUMONIAE INFECTION IN CHILDREN IN 2007-2010

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Introduction: Chlamydophila pneumoniae is the etiological agent of pharyngitis, bronchitis and pneumonia. Infection accompanied by hoarseness and long lasting dry cough. Chronic cough like pertussis and bronchial hypersensitivity persists longest in children under 4 years of age. This microorganism is spread by droplet and reservoir are sick, as well as asymptomatic vectors. Aim: Analysis and evaluation of the frequency of chlamydial respiratory infections in children in Lower Silesia in 2007-2011. Material and methods: 2723 examined throat swabs from patients aged from 20 months to 18 years, with various clinical symptoms such as dry cough, cough with phlegm and asymptomatic outpatients because of complaints from the respiratory tract. The study was performed by IFA with the use of reagent (test Chlamydia Cel Pn Cellabs company). Results: In 2007, the study group achieved 53.3% (594/1114) of positive results of tests for Chlamydophila pneumoniae. In the study group was 558 girls, of whom 308 were obtained positive results, ie 55.2% and 556 boys, of whom 286 were obtained positive results, ie 51.4%. A dry cough as a symptom occurred in 522 patients in 303 cases detected Chlamydophila pneumoniae, ie 58.0%. In patients who had a a cough with phlegm percentage of positive results were obtained in 47.5% (194/408) of patients. The remaining group were patients who showed no signs of chlamydial infection (prophylactic or patients after contact with the patient with Chlamydophila pneumoniae). In this group, 97 children showed the presence of Chlamydophila pneumoniae, which accounts for 52.7% (97/184). In 2008, the study group achieved 41.6% (209/503) of positive results of tests for Chlamydophila pneumoniae. In the study group was 252 girls, of whom 113 were obtained of positive results, ie 44.8% and 251 boys, of whom 96 achieved of positive results, ie 38.2%. Group of patients who had a dry cough that 218 children who were detected in 85 cases, Chlamydophila pneumoniae, ie 39.0%. In patients have experienced a cough with phlegm percentage of positive results were obtained in 46.3% (87/188) of patients. Groups of children who showed no signs of chlamydial infection, had 97 patients. In this group of 37 children showed the presence of Chlamydophila pneumoniae, which accounts for 38.1% (37/97). In 2009, the study group achieved 43.1% (276/641) positive results of tests for Chlamydophila pneumoniae. In the study group was 326 girls, of whom 135 were obtained of positive results, ie 41.4% and 315 boys, of whom 141 were obtained of positive results, ie 44.8%. Dry cough occurred in 295 patients who were detected in 122 cases, Chlamydophila pneumoniae, ie 41.4%. In patients who develop a cough with phlegm percentage of positive results were obtained in 44.3% (120/271) of children. In patients who showed no signs of chlamydial infection showed the presence of Chlamydophila pneumoniae in 34 children representing 45.3% (34/75). In 2010, the study group achieved 36.4% (173/475) positive results of tests for Chlamydophila pneumoniae. In the study group was 216 girls, of whom 90 achieved positive results, ie 41.7% and 259 boys, of whom 83 achieved positive results, ie 32.0%. Of the 237 patients with dry cough showed the presence of Chlamydophila pneumoniae in 89, ie 37.6%. In patients who develop a cough with phlegm percentage of positive results was obtained in 34.6% (66/191). Groups of children who showed no signs of chlamydial infection, had 47 children. In this group of 18 children showed the presence of Chlamydophila pneumoniae, which accounts for 38.3% (18/47). Conclusions: In the region of Lower Silesia in the years 2007-2010, a group of children there is a decrease of behavior of a typical clinical course or close to chlamydial infection, resulting in a decrease in the number of children examined in relation to previous years. The study group, however, is characterized by high infectivity of Chlamydia by air-borne droplets. Chlamydophila pneumoniae is an atypical pathogen, and the diagnosis of this pathogen should be included after exclusion of other, typical of the respiratory system for patient age and microorganisms.

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