We conclude that IBD occurs in children of central Saudi Arabia with a low incidence and prevalence rates similar to Asians and Black Africans, a finding that is not surprising in view of the location of Saudi Arabia in the west of Asia separated from Africa only by the Red Sea. The pattern of these conditions, however, is similar to that found in other countries.

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References

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Serologic Response to Hepatitis B Vaccination in Children with Isolated Anti-HBc

The clinical significance of anti-HBc alone is ambiguous. The prevalence of isolated anti-HBc in various populations has ranged 0.1 per cent to 20 per cent.1,2 Seventeen children with anti-HBc alone were vaccinated with recombinant hepatitis B vaccine given at months 0, 1, and 2, and followed by testing for serological response 1 month after each vaccination. The anti-HBs response of these subjects was compared with that of 17 age-matched seronegative subjects who received the vaccine in the same dose schedule.

A primary response in all cases was observed in 58.8 per cent and an anamnestic response in 35.2 per cent of all cases. Only one case had no antibody response after three vaccinations. In the control group with no anti-HBc marker, the geometric mean anti-HBs titers were significantly higher than primary responders at 2 and 3 months (81.4 ± 42.4 vs. 52.7 ± 17.5 at 2 months, p = 0.01; and 188.2 ± 92.1 vs. 80.4 ± 26.3 at 3 months, p = 0.00).

Response rates after vaccination are cited between 56 per cent and 100 per cent.2 In Turkey, Sunbul, et al.3 found an anamnestic response in 42.5 per cent and a primary response in 48.4 per cent of those cases. In a study on the effect of hepatitis B vaccine in subjects with an isolated anti-HBc, 56 per cent developed a primary anti-HBs and 16 per cent an anamnestic response.4 Silva, et al.5 reported a primary response rate of 80 per cent. According to our findings, the overall primary anti-HBs response rate in cases with an isolated anti-HBc may be as high as 59 per cent.

In conclusion, cases with isolated anti-HBc should be included in hepatitis B vaccination programs.

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Adverse Drug Reactions in a Department of Pediatric Surgery

Adverse drug reactions (ADRs) may cause a variety of symptoms and changes in laboratory values. According to the World Health Organization (WHO) definition, ADR is any noxious, unintended, and undesired effect of a drug, which occurs at doses used in human for prophylaxis, diagnosis or therapy. Few studies are to be found in the literature on ADRs in children, although in the last few decades they have become victims of severe ADRs. The reported incidence of ADRs in hospitalized children ranged from 4.37 per cent to 16.78 per cent in published studies. Therefore, we studied ADRs based on the ADR definition of the WHO. In pediatric patients the most widely used drugs are antibiotics and vaccines. The cephalothin sodium, and an anaesthetic drug (fentanyl). The frequency of ADRs in hospitalized patients found in this survey is lower than that reported by others such as Martinez (16.6%) and Gonzalez-Martinez (13.7%). In our study, 3.7% of patients admitted to the Department of Pediatric Surgery at the Children's Medical Center, Tehran, Iran to investigate and determine occurrence adverse reactions. They are common, can be life threatening and also unnecessarily expensive. Results suggest that factors influencing the pharmacodynamic and pharmacokinetic characteristics of the patient, e.g. organ insufficiency (lower age) or multiple drug use, should increase alertness in order to prevent ADRs. It is therefore important for prescribing clinicians to be aware of the toxic profile of drugs they prescribe and to be ever vigilant for the occurrence adverse reactions.

Table 1

Patient characteristics and length of hospital stay (mean ± s.d.)

<table>
<thead>
<tr>
<th>Sex of patients</th>
<th>Number</th>
<th>Age (year)</th>
<th>Weight (kg)</th>
<th>Length of stay (days)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>71</td>
<td>2.5 ± 2.5</td>
<td>10.8 ± 5.8</td>
<td>2.3 ± 1.1</td>
</tr>
<tr>
<td>Female</td>
<td>23</td>
<td>3.4 ± 3.8</td>
<td>13.7 ± 9.6</td>
<td>2.4 ± 3.1</td>
</tr>
</tbody>
</table>

References


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