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Title: Clinical and laboratory findings of lower respiratory tract infections in pediatric cases: Near East University experience

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Body: AIM: Nasopharyngeal swab RT-PCR DNA analysis can detect the respiratory tract pathogens(RTP) rapidly and therefore widely used. We aimed to detect the RTP and evaluate the clinical findings of our patients. MATERIAL-METHOD: Pediatric patients with lower respiratory tract infections admitted between January 2012-December 2012 were enrolled. Nasopharyngeal swab RT-PCR DNA analysis were performed to all patients. RESULTS: Thirty four patients were between ages 0-12 years. The median age was 8.5months(0-144). Four(11.7%) were newborn. Thirteen(38.2%) were girls, 21(61.8%) were boys. On admission, 18(52.9%) had dry cough, 7(20.6%) high fever, 20(58.8%) wheezing, 10(29.4%) increased breathing. In physical examination, 14(41.2%) had rhinore, 3(8.8%) tonsillitis, 5(14.7%) hypoxia, 4(11.8%) tachypnea, 17(50%) rals, 12(35.3%) ronchi. Posterior-anterior chest x-ray revealed infiltration for 8(23.5%), consolidation for 3(8.8%) patients. M.pneumonia was detected in 1(2.9%), S. pneumonia in 18(52.9%), H.influenza in 6(17.6%) and B. pertussis in 2(5.9%). Adenovirus was in 2(5.9%), Human parainfluenza type 2 in 1(2.9%) (HPI), HPI type 3 and HPI type 1 were detected in 5(14.7%). HPI type 4 was in 21(61.8%). Rhinovirus was detected in 12(35.3%) patients, respiratory syncytial virus in 12(35.3%), influenza A in 3(8.8%), influenza B in 1(2.9%) were observed. Twenty(58.8%) patients were treated outpatient. CONCLUSION: RT-PCR method for RTP provides the clinician an advantage to modify the treatment especially for newborns where the infections can worsen easily as well as limiting the unnecessary use of antibiotics.