CPU-Net MEDICAL ALERT



This is the first issue of the Child Protection Unit Network (CPU-Net) Medical Alert, a bi-monthly quick bulletin to give our members important news, updates and announcements.

Vol. 1 Issue 1: February 2003

STI in CSA at PGH-CPU: a 5-year retrospective study*

- A study by Dr. Xenia Fabay (PGH Peds Infectious Disease Fellow & CPU Net member) et al. showed that there is a 4.06% prevalence of sexually transmitted infections (STI) among sexually abused children seen at the PGH-CPU from 1997 to 2002, with 2.06% prevalence rate for *N. gonorrhea*.
- Vaginal or urethral discharge has 90.24% sensitivity in detecting gonococcal infections.
 Thus, abused children who present with vaginal discharge should be tested for *N. gonorrhea* and if at high risk, do test for other STIs.
- Should you give antibiotics to all kids with vaginitis?

Not all kids with vaginitis need antibiotic treatment. **Use the proper test** to establish the cause. Remember, diagnosing STI such as *N. gonorrhea* in young kids may be the sole evidence of abuse.

In Xenia's study, *N. gonorrhea* had a 62.5% resistance to Penicillin. Thus, Ceftriaxone (125mg IM, single dose) is used as empiric treatment with Cefixime (8mg/kg oral, single dose; max 400 mg) as the alternative drug. Do treat for possible Chlamydia infection (Azithromycin 20mg/kg, single dose; max 1 gram; or, Erythromycin 50mg/kg per day divided into 4 doses for 10 to 14 days) in kids diagnosed with *N. gonorrhea*.

* First Place, Pediatric Infectious Disease Society of the Philippines (PIDSP) Research Contest 2003

COLPOSCOPE PROBLEMS?

Let us help you. Call us!

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Remember the dates!

ROUNDTABLE DISCUSSIONS

- April 30, 2003: Hotel Veniz, Baguio City
- May 26-28, 2003: POSTPONED
- September 2003: To be advised

CPU-Net ANNUAL CONFERENCE:

Nov. 10-11, 2003: Manila