

0264. Cefuroxime axetil versus placebo for children with acute respiratory infection and imaging evidence of sinusitis: A randomized, controlled trial

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Aim: To evaluate the efficacy of antibiotic treatment in children who presented in medical care with respiratory infection and had imaging evidence of sinusitis. **Methods:** Eighty-two children (4 - 10 y) with acute respiratory symptoms and ultrasonography findings suggestive of acute rhinosinusitis were enrolled in a randomized, double-blind trial. The sinus findings were confirmed with plain radiographs. The children received either cefuroxime axetil in 125 - mg capsules twice a day for 10 d or placebo. Main outcome measures were complete cure in 2 wk and absence of prolonged symptoms or complications. **Results:** A total of 72 children (88%) completed follow-up. The sinusitis findings in the ultrasound could be confirmed with plain radiographs in 65 of the 72 patients (90%). The proportion of children completely cured by day 14 was similar in both groups (difference 6%, 95% confidence interval - 16% to 29%). Similarly, there was no significant difference in the proportions of children who escaped prolonged disease and complications between the groups (difference 7%, -9% to 24%). **Conclusion:** A 10 - d course of cefuroxime axetil offered no clinical benefit to children with an acute respiratory illness and imaging evidence of acute sinusitis.

头孢呋辛酯与安慰剂用于急性呼吸系统感染和有鼻窦炎患儿的一项随机对照试验

目的:评价到医疗保健系统就诊的呼吸系统感染和有鼻窦炎影像学证据的患儿应用抗生素治疗的疗效。**方法:**有急性呼吸系统症状和超声检查结果提示急性鼻窦炎的 82 例患儿 (4 ~ 10 岁) 被纳入这一随机、双盲试验, 鼻窦炎的结果得到了 X 线平片的证实, 这些儿童接受了 10 d 的头孢呋辛酯胶囊 (125 mg/次, 2 次/d) 或安慰剂。主要观察指标是在 2 周时完全治愈并且无症状迁延或并发症出现。**结果:**共有 72 例患儿 (88%) 完成了随访, 在 72 例患儿中有 65 例 (90%) 患儿的鼻窦炎结果得到了 X 线平片证实。两组间在 14 d 时完全治愈的比例上相同 (差异为 6%, 95% CI - 16% ~ 29%)。同样, 避免了病程迁延和并发症患儿的比例在两组间无显著差异

(差异为 7%, 95% CI - 9% ~ 24%)。结论: 头孢呋辛酯 10 d 疗程对有急性呼吸系统疾病和急性鼻窦炎影像学证据的患儿未见有明显的临床益处。

0265. Safety of intravenous terbutaline in acute severe asthma: A retrospective study

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Objective: (1) To determine the effect of intravenous terbutaline in children with acute severe asthma on parameters like heart rate, blood pressure, electrocardiogram and serum electrolytes; (2) to assess the safety profile and to evaluate the outcome of children treated with intravenous terbutaline for acute severe asthma. **Design:** Retrospective study of admission records of children admitted with acute severe asthma who needed intravenous terbutaline. **Setting:** Children's Hospital at the Leicester Royal Infirmary, UK. **Patients:** 77 children with acute severe asthma admitted between April 1999 and October 2002. **Results:** There was a significant increase in heart rate and significant fall in diastolic blood pressure in this cohort. Four patients required inotropic support. None of the patients had cardiac arrhythmias. Potassium supplements were required in 10 patients due to hypokalaemia. All patients improved and none required initiation of ventilation after commencing terbutaline. There was no mortality in this cohort. **Conclusions:** Terbutaline was found to be safe for use in this patient group in doses ranging between 1 and 5 $\mu\text{g}/\text{kg}/\text{min}$. Intravenous terbutaline was found to be a useful adjunct in those who failed to respond to standard initial therapy.

一项回顾性研究: 急性重症哮喘静脉内应用特布他林的安全性

目的:①确定急性重症哮喘患儿静脉内应用特布他林对心率、血压、心电图和血清电解质参数的影响; ②评估其安全性并对静脉内应用特布他林治疗急性重症哮喘患儿的结局进行评价。**设计:**对因急性重症哮喘住院并需要静脉内应用特布他林的患儿的住院记录进行回顾性研究。**机构:**英国莱斯特皇家医院的儿童医院。**病例:**在 1999 年 4 月至 2002 年 10 月间入院的 77 例急性重症哮喘患儿。**结果:**此队列中心率显著增加、舒张压显著降低, 4 例患儿需要强心药物支持, 无患儿发生心律失常, 10 例患儿由于低钾血症需要补钾。所有患