

DIARRHEA AMONG CHILDREN ADMITTED TO A PRIVATE TERTIARY-CARE HOSPITAL, BANGKOK, THAILAND: A CASE SERIES

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Abstract. We report here a case series of pediatric diarrhea cases admitted to a private tertiary-care hospital in Bangkok, Thailand. Retrospective data were collected from computerized medical records of 2,001 children with diarrhea (80.9% Thai), ages birth to 14 years, admitted to our facility during 2000-2005. The most common symptom leading to admission was vomiting (34.6%), while the most common sign was dehydration (63.6%). The largest proportion was comprised of toddlers (45.4%), followed by infants (24.2%). Of the total 2,564 admissions, 1,874 (73.1%) stool samples were collected and examined for red blood cells (RBC) and white blood cells (WBC); 57.1% and 70.6% were negative for RBC and WBC, respectively. Of the 1,878 blood specimens collected for electrolytes, 21.6% show acidosis. Of 1,793 stool specimens collected, the majority revealed normal flora (72.9%). Enteropathogenic *Escherichia coli* (EPEC) were seen in 10.8%. *Campylobacter jejuni* was found in only 2.9% of specimens, while of 1,065 specimens tested for rotavirus antigen, 23.9% were positive. In addition to bacterial cultures and their anti-microbial sensitivities, factors associated with rotavirus infection, *C. jejuni*, and metabolic acidosis, were also explored in this study. Rotavirus infections were more likely to be associated with children older than toddlers (3-14 years old), being admitted within the first day of the symptoms, those who were more acidotic, and was more common in the first 3 months of each year. Our data were little different from community-acquired infections reported among the general population.

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