



Epidemiology of Pediatric Trauma in the National Pediatric Trauma Registry Pilot Study and Pedunculated Lipofibroma in a Pediatric Patient

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INTRODUCTION

A thorough review of the literature was performed utilizing. We focused on using meta-analysis from adult populations to review current practices in interpretation and methodology and find concordant pediatric studies to determine if the same applications are validated in pediatric populations. Current evidence supports the usage of procalcitonin as both a sensitive and a specific marker for the differentiation of systemic inflammatory response syndrome from sepsis in pediatrics with increased diagnostic accuracy compared to commonly used biomarkers including complete blood counts and C-reactive protein. Although the body of evidence is limited, initial observations suggest that procalcitonin can be used in pediatric trauma and burn patients as both a prognostic and a diagnostic marker, aiding in the identification of infection in patients with extensive underlying inflammation.

DESCRIPTION

The authors report an atypical case of secondary syphilis in an adolescent female presenting to a tertiary-care center with fever, weight loss, oral sores, painful inguinal lymphadenopathy, and transient macular rash. Given the lower prevalence of syphilis in adolescent females, this infection was not included on the initial differential diagnosis. The evolving presentation of syphilis over time complicates the diagnosis and management of these infections, as it did for the patient in this report. The authors provide a detailed discussion of the patient's clinical findings, including the protean features of syphilis infection. This case is particularly relevant to the fields of general pediatrics and pediatric hospital medicine. The increasing scientific information clearly demonstrates the important role of inflammation in asthma. This evidence has led physicians to fo-

cus their treatment on the elimination of inflammation instead of working solely against bronchoconstriction. Steroids and nonsteroidal agents are currently used to prevent this inflammatory component. This paper focuses only on nonsteroidal anti-inflammatory agents such as sodium cromoglycate, nedocromil sodium and ketotifen and their use in pediatric asthma. The discussion on each medication addresses its mechanism of action, the evidence concerning its efficacy in pediatrics (ie, clinical pharmacology, acute bronchial challenge, late asthmatic response, bronchial hyperreactivity, clinical efficacy) and the pediatric dose.

CONCLUSION

While colorectal carcinoma is a common gastrointestinal cancer in adults, it is rare in pediatrics with an incidence and represents a fraction of neoplasms encountered in children. Malignant neoplasms represent a major cause of mortality in the pediatric age group. While presenting with weight loss, iron deficiency, rectal bleeding, abdominal pain, and change in bowel habits, or symptoms similar to acute appendicitis, the working diagnosis may be considered to be anorexia. This case illustrates the importance of considering colon cancer among other disease entities as a cause of unintentional weight loss in adolescents. While this is a rare occurrence in the pediatric population, significant unintentional weight loss with altered bowel habits should prompt a search for underlying malignancy even in the absence of a positive family history or predisposing cancer syndromes. The case of 38-month-old boy is being reported who was brought to the pediatrics clinic with fever, cough, hemoptysis, and breathing difficulty. Imaging studies revealed a right lower chest mass. Lobectomy and histopathological examination revealed it to be predominantly solid pleuropulmonary blastoma type.

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