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Current Abstracts

e35 Feto-maternal Alloimmune Thrombocytopenia Presenting as Intracerebral

Soraisham Amuchou Singh, Jeff Pollard and Nalini Singhal

Division of Neonatology, Department of Pediatrics & Department of Maternal and Fetal Medicine University of Calgary, Canada

Abstract. Feto maternal alloimmune thrombocytopenia is a serious fetal disorder resulting from platelet antigen incompatibility between the mother and the fetus. Intracranial bleeding is the most serious complication of alloimmune thrombocytopenia and can result in severe disability and death in utero. We report a case of intracerebral hemorrhage in utero resulting from alloimmune thrombocytopenia. [Indian J Pediatr 2005; 72(3): e35-e37] E-mail: amuchou@yahoo.com

e38 Jeune Thoracic Dystrophy with Right Sided Diaphragmatic Hernia

N.K. Kalappanavar, P. Bidhu, B. Kannan, M. Devanand and S. Chidanand

Department of Pediatrics, JJMMC, Davangere, Karnataka, India

Abstract. Jeune thoracic dystrophy is a rare autosomal recessive chondrodysplasia, first described by Jeune et al in 1955. Early death is usually the consequence of asphyxia with or without pneumonia. The authors reported a newborn with Jeune thoracic dystrophy and a right-sided diaphragmatic hernia. [Indian J Pediatr 2005; 72 (3): e38-e39] E-mail: kalappanavar@yahoo.co.uk

e40 An Extradural and Subdural Hematoma in a Neonate

Alok K. Sharma, Batuk D. Diyora, Sanjay G. Shah, Ajay K. Pandey and Ravikrishna Mamidanna

Department of Neurosurgery, Lokmanya Tilak Municipal Medical College & General Hospital, Sion, Mumbai, India.

Abstract. Traumatic brain injury following birth is common in newborn but significant intracranial hematoma following birth injury is not that usual. Even busy pediatric trauma centers have about only 1 to 3% of admission that require neurosurgical care. Extradural hematoma (EDH) associated with intracerebral and subdural haematoma (SDH) is even more rare in newborn. If this is not detected and treated in time, the outcome may be fetal. A case of EDH with subdural and intracerebral haematoma in a 3-day-old neonate is presented. Etiology and problems in diagnosis and management are discussed.

[Indian J Pediatr 2005; 72 (3): e40-e42] E-mail: batuk73@yahoo.co.in; drsanjayshah2002@yahoo.com

e43 Psychiatric Chest

Chitra Dinakar, S. Lewin and Kanishka Das

Department of Pediatrics and Pediatric Surgery, St. John's Medical College, Hospital, Bangalore, Karnataka, India

Abstract. An adolescent had poorly controlled abnormal behavior and recurrent fever for three months. Evaluations revealed a mediastinal tumour only 3 months after presentation. Excision of the tumour resulted in complete recovery of the psychosis. This is the first report of a paraneoplastic limbic encephalitis presenting as psychosis associated with an immature mediastinal teratoma. [Indian J Pediatr 2005; 72 (3): e43-e44] *E-mail: chitra_dini@yahoo.co.uk*

e45 Sodium Stibogluconate and Polymorphic Ventricular Tachycardia

Arun K. Baranwal, Ravi N. Mandal, Rupa Singh and Sunit C. Singhi

Department of Pediatrics, B. P. Koirala Institute of Health Sciences, Dharan, Nepal.

Abstract. Numerous antimicrobials including pentavalent antimonials are implicated in causing prolong QT-interval and ventricular tachycardia. Torsades de pointes is rarely documented with use of Sodium stibogluconate. Here is described a 12-yr-old girl with visceral leishmaniasis, who developed syncopal attacks, prolong QT-interval, polymorphic ventricular tachycardia and torsades de pointes after completing a course of Stibogluconate (20 mg/Kg/day for 30 days). Prolong lidocaine infusion and cardioversion were life saving. [Indian J Pediatr 2005; 72 (3): e45-e47] E-mail: Baranwal1970@yahoo.com