8) Repeated ultrasound-guided aspirations of the hip joint for "septic arthritis"

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The most common treatment of the septic hip is arthrotomy with variable periods of drainage, combined with IV antibiotics treatment.

We present a group of fifty six children diagnosed with septic arthritis of the hip joint. Fifty two of the patients were treated only with repeated aspirations of the hip and lavage. The aspirations were done under ultrasound guidance using topical anesthesia or under sedation. The joints were irrigated on daily basis. The mean number of aspirations were 3.6 (range 3-5), and 75% of the patients resumed walking after 24 hours

Repeated hip joints aspiration is a safe and effective method of treatment of septic hip, enabling to avoid surgical intervention and general aneasthesia. Early Recovery was noted in this series.

Arthrotomy of the hip joint followed by a variable period of drainage or continuous irrigation and drainage is considered the accepted treatment of septic arthritis of the hip joint (SAHJ). The authors reviewed the results of a cohort of children with SAHJ with repeated aspirations of the hip joint. Thirty-four children diagnosed with SAHJ were treated with repeated aspirations of the hip joint. The aspirations were performed under ultrasound guidance and topical anesthesia or under sedation. After the aspiration the joint was irrigated using the same needle, and the procedure was repeated daily. Six of the patients were operated on and then treated with aspirations because of drain dislodgement or clogging. Twenty-eight of the patients were treated primarily with repeated aspirations. Four of those patients did not improve and underwent arthrotomies, and 24 were treated only by repeated aspirations and healed completely. The mean number of aspirations was 3.6 (range 3-5), and 75% of the patients resumed walking after 24 hours. anesthesia complications were seen. Repeated aspiration is a safe and efficacious method of treatment for SAHJ. This method of treatment is not associated with surgery and its complications and prevents scarring of the skin and the need for general anesthesia. Faster return to normal activity was noted in this series.

9) Awareness of Ambiguous Genitalia ln Gaza

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Abstract:

Ambiguous genitalia is a rare disease but noted to be a common presentation in our pediatric endocrinology and urology clinics. The aim of our study is to identify the size of the problem, and to evaluate the family response to gender assignment.

Method: We review the files of the patients with ambiguous genitalia during a period of 5 years. A total of 80 children with ambiguous genitalia have been evaluated and treated. The three most common causes were Congenital adrenal hyperplasia CAH, deficiency of Ketosterod Reductase 17KR, and , deficiency of 5 alpha-reductase..

Most of the cases (42%) were from the north governorate. Consanguinity was very high (84%).17KR deficiency almost confined to the north governorate which indicates inbred gene effect in this area.

Gender assignment was a problem in few cases, Social shame was present in almost all cases .The result of **Surgical Reconstruction Gentiplasty** of these Ambiguous genitalia was comparable to the international figures.

