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Bacille-Calmette Guerin vaccine-induce hip tuberculosis in an infant: A case report

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Tuberculosis (TB) remains to be a significant global health burden to this day. The WHO Expanded Program of Immunization (EPI) recommends the Bacille-Calmette Guerin (BCG) vaccine to protect against hematogenous spread of primary tuberculous and other more severe types of TB infection in infants. However, a number of cases have been published reporting its share of complications such as regional lymphadenitis, localized abscesses and osteomyelitis. We describe a case of an eight month old boy with hip osteomyelitis from BCG vaccination, the first documented case in Oman. He presented with one-month history of intermittent fever associated with limitation of range of motion (ROM) in the right hip area. He received up to date EPI vaccination and denied exposure to persons with TB infection. He was initially treated for bacterial septic arthritis until *Mycobacterium BCG* strain has been detected on GeneXpert. Tuberculosis (TB) is a bacterial infection caused by *Mycobacterium tuberculosis*. Lungs are the most common site to be involved but can affect any part of human body. On literature review, BCG vaccine can cause uncommon but significant complications in some infants, including osteomyelitis. Articular TB infection is largely a clinicoradiologic diagnosis. Clinical suspicion can be supported by radiological imaging in addition to culture and genomic studies to confirm the diagnosis. Chemotherapy is recommended for all patients with active disease. Supplemental surgical intervention is restricted for those with disease process complications. Although the BCG vaccine may be associated with complications, the potential morbidity and mortality from tuberculosis outweighs them. In children with symptoms suspicious of TB infection, timely diagnosis and immediate treatment are necessary to ensure the best outcome for the patient.

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Identifying challenges and ways of advancement in providing healthcare universally

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Challenges in providing healthcare in the universe is multi-factorial, knowing well that health for all is holistic concept calling for efforts in agriculture, communication, industries, education and housing, just as much as medicine and public health. Primary care is an aspect of health care that is putting advancement and vast development in health care of the universe because the involvement of primary care physician in scientific diagnosis and daily improvements has entrenched into the world of evidence base medicine including the birth of primary healthcare designed to bring healthcare to the door step of an individual, families and communities across the globe as launched, declared and accepted by some of the participating country in 1978 World Health Assembly, Alma-Ata declaration. Moreover, it is recognized that in both developed and developing countries, public expected the standard of health services is not being provided. There is lack of health services in some areas and unnecessary duplication in others. A very high proportion of the population in many developing countries and especially in the rural areas does not have access to health services. The health services favored only the privileged few and urban dwellers. This is because, governmental plans is not properly followed. Although, there is the recognition that health is fundamental human right, there is a denial of this right to millions of people who are caught in the vicious circle of poverty and ill health. There are marked differences in health status between people in different countries as well as between different groups in the same country; their cost of health care services is rising without much improvement in their quality. In short, there has been a growing dissatisfaction with the existing health services and a clear demand for better health care. Studies showed some of the greatest challenges in providing health care for all as lack of adequate demographic records in most of the affected countries, poor planning and implementation of health care, politicizations of health of the citizenry, and mass erection of hospital buildings, lack of governmental free will to provide health care services, ignorance and illiteracy on the part of the citizen, lack of strong health education, purchased of sophisticated equipment without professionals to use them, lack of manpower and unequal distributions of the available ones and inability of the professionals to work as a team. All these were identified and can be corrected.

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