CASE PRESENTATION

DR. Muhammad Waqqas Akram

PGT-I
DEPTT OF PAEDIATRICS
BBH Rawalpindi
PROFILE

- Name: Ali Haider
- Age: 3 1/2 Months
- Sex: Male
- Address: Fateh Jang
- DOA: 15-04-2009
PRESENTING COMPLAINTS

• Failure to thrive since birth
• Progressive pallor 01 month
• Fever 01 week
HISTORY OF PRESENT ILLNESS

- SVD, full term, at home
- Birth weight was 2.5kg
- Poor feeding
- Poor weight gain
- Present weight 3.4 kg
• Progressive pallor 01 month

• Abdominal Distention

• High grade intermittent fever 1 week

• Breathing difficulty
Systemic Review

No H/O

Cyanosis, Jaundice, Convulsions, Stridor, Vomiting, Diarrhea, Polyurea, Oligurea, Petechiae & Bruises, Bleeding from any site
Treatment History:

• Treatment from local doctors

• Received multiple oral antibiotics, antipyretics, bronchodilators and nasal drops

• No favourable response
Birth History

Antenatal History

Perinatal History

Postnatal History
Family history

- First issue of a consanguineous marriage
- No history of Abortions
- Thalassemia
- Contact with TB
FEEDING HISTORY

- Exclusively breast fed
IMMUNIZATION

- Vaccination up to date
- BCG scar +ve
DEVELOPMENTAL HISTORY

- NORMAL DEVELOPMENTAL MILESTONE
  - GROSS MOTOR
    - No head lag
    - Head raised in prone position
  - FINE MOTOR AND VISION
    - Follows light through arc of 180
    - Defensive blink present
    - Grasps the cube
DEVELOPMENTAL HISTORY

• HEARING AND SPEECH
  • Turns to nearby voice
  • Vocalizes

• SOCIAL BEHAVIOUR
  • Happy response to mother’s face
  • Social smile present
SOCIOECONOMIC HISTORY

- Lower socioeconomic class
EXAMINATION

- General Physical Examination

  - Sick-looking markedly pale young infant having severe respiratory distress with protuberant abdomen.

  - No cyanosis, jaundice, lymphadenopathy, edema, petechiae & bruises
**VITALS**

- RR 65/MIN
- Pulse rate 130/min
- TEMP 101 F
- B.P 60/40 mmHg

**ANTHROPOMETRY**

- LENGTH 60 cm (50<sup>th</sup> PERCENTILE)
- WEIGHT 3.4 Kg (BELOW 5<sup>th</sup> PERCENTILE)
- OFC 42 cm (90<sup>th</sup> PERCENTILE)
RESPIRATORY SYSTEM

- **INSPECTION**
  - Normal shaped chest
  - Respiratory distress with sub costal recessions

- **PALPATION**
  - Central trachea, Apex beat in 5\textsuperscript{th} ICS in midclavicular line
  - B/L Normal chest expansion

- **PERCUSSION**
  - Resonant & equal on both sides

- **AUSCULTATION**
  - Harsh vesicular breathing with B/L crepts and ronchi
ABDOMINAL EXAMINATION

- INSPECTION
  - Protuberant, Central umbilicus of normal shape

- PALPATION
  - HEPATOMEGALY- Palpable 5 cm BRCM
    Total span 13 cm
    Firm, smooth surface, diffuse margins
  - SPLENOMEGALY- Palpable 6cm BLCM, Firm, non-tender

- PERCUSSION
  - No evidence of free fluid

- AUSCULTATION
  - Normal bowel sounds
CNS EXAMINATION

- **Higher mental functions**
  - Fully conscious
  - Normal behaviour

- **Cranial nerves**
  - Intact

- **Motor system**
  - Reduced bulk and nutrition of muscles
  - Normal tone and power
  - Intact deep and superficial reflexes

- **Sensor system**
  - Normal
SUMMARY

- Haider ali, 3 1/2 months, MC product of consanguineous marriage, admitted with failure to thrive, progressive pallor & high grade intermittent fever. On admission he was markedly pale, febrile, in severe respiratory distress with gross hepatosplenomegaly.
DIFFERENTIAL DIAGNOSES

- Chronic hemolytic Anaemias
  - Hereditary spherocytosis
  - Thalassemia
- Osteopetrosis
- Congenital leukemia
INVESTIGATIONS.... BLOOD CP

- Hb: 6.1 g/dl
- PLATELETS: 87000 /ul
- TLC: 36020 /ul
  - POLMORHS: 36%
  - LYMPHOCYTES: 40%
  - MONOCYTES: 4%
  - EOSINOPHILS: 2%
  - MYELOCYTES: 8%
  - METAMYELOCYTES: 9%
  - BAND FORM: 1%
INVESTIGATIONS…. PERIPHERAL FILM

- ANISOCYTOTIS ++
- POIKILOCYTOTIS ++
- MICROCYTOTIS ++
- MACROCYTOTIS ++
- HYPOCHROMIA ++
- NUCLEATED RBC 97/100 WBC
- RETIC COUNT 10%
## INVESTIGATIONS.... CHEMISTRY

<table>
<thead>
<tr>
<th>INVESTIGATION</th>
<th>RESULT</th>
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<tbody>
<tr>
<td>ALT</td>
<td>21 units/Dl</td>
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<tr>
<td>BILIRUBIN</td>
<td>1.3 mg/dL</td>
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<tr>
<td>ALK. PHOSHATASE</td>
<td>602 units/dL</td>
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<tr>
<td>UREA</td>
<td>32 mg/dL</td>
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<tr>
<td>CREATININE</td>
<td>0.6 mg/dL</td>
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<tr>
<td>BSR</td>
<td>133 mg/dL</td>
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<tr>
<td>CALCIUM</td>
<td>7.3 mg/dL</td>
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</tbody>
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INVESTIGATIONS-

- Mantoux test - negative
- ICT- MP - negative
- Serum immunoglobulins - normal
INVESTIGATIONS....RADIOLOGY

• CXR
  ◦ Clear lung fields
  ◦ Normal cardiac shadow
  ◦ Rugger-jersey Bones
  ◦ Splayed osteochondral junctions
INVESTIGATIONS....RADIOLOGY

- X-RAY SKULL
  - Sclerosis of the base of skull sparing the culvaria
INVESTIGATIONS....RADIOLOGY

• LONG BONES
  ◦ Splayed metaphysis
  ◦ Bone within bone appearance
  ◦ Longitudinal metaphysial striations

• PHALANGES
  ◦ Alternating dense and light bands
INVESTIGATIONS....
BONE MARROW ASPIRATION

- Hyperactive bone marrow with normal cell lineages
- Giant osteoclasts seen
- No LD bodies seen
- No malarial parasite seen
FINAL DIAGNOSIS

OSTEOPETROSIS
(MALIGNANT INFANTILE OSTEOPETROSIS)