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(vesicoureteral reflux)

(vesicoureteral reflux)

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VUR

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VUR

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VUR

(p>0.05)

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Camach Hoberman
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Lama ()% / Hoberman ()

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- 1. Ellis DA, WILLIAM EH, PATRICK NP. Pediatric Nephrology . 5 th ed.philadelphia; Lippincott Williams& Wilkins, 2004:1027-1048.
- 2. Elder J, Behrman RE, Kliegman RM, Jenson HB. Philadelphia; W.B Saunders Company ,2004: 1785-1789
- 3.Hoberman A, Charron M, Hickey RW. Imaging Studies After a First Febrile Urinary Tract Infection In Young Children. New England j med 2003; 348: 195-202.
- 4. Cammachomatri V, Estorchcabreram, Caffarati S, Fulucini J0. Role of Direct Radionuclide Cystography and Renal study by DMSA in the Diagnosis and Follow Up of VUR. Rev Esp Med nuc 2002; 21(4): 269-274.
- 5. Lama G, Russo M, De Rosue. primary VUR and Renal Damage in The First Year of Life. Pediatric Nephrology 2000; 15(3-4): 205-210.
- 6. Tepmongkol S, Chotipanich C, Sirisalipoch S. Relationship Between Veisco ureteral Reflex and Renal Cortical Scar Development in Thai Children: the Significance of Renal Cortical

60

- Scintigraphy and Direct Radionudide Cystography. J Med Assoc Thai 2002; 85; 5203-9.
- 7.Howard RG, Roebuck DJ, Yeung PA. Vesicoureteral Reflux and Renal Scarring in Chinese Children. Br J Radiol 2001; 74(880): 331-4.
- 8. Wennerstrom M, Hassons, Jodal U. Primary and Acquired Renal Scaring in Boys and Girls with UTI. J pediatric 2002; 136(1): 30-34.
- 9.Johanson CE, Shurin PA, Marchat CD. Identification of Children Requiring Radiologic Evaluation for UTI. Pediatric Infection Disease 1985; 4: 656-660.
- 10. Goldman M, Bistritzer T, Horne T. The Etiology of Renal Scars in Infants with Pyelonephritis and Vesicoureteral Reflux. Pediatric Nephrology 2000; 14(5): 385-388.
- 11. Dirchfied MR, Nadal HR. The DMSA Scan in Pediatric Urinary Tract Infection. Australas Radiology 1998; 42 (4): 318-20.
- 12. Polito c, Rambaldi PF, Mansi L. Unilateral VUR and Low Contralateral Renal Damage. J Pediatric 2001; 138 (6): 875-9.

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Evaluation of Renal Scar in Children with VUR and Urinary

Tract Infection

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Abstract

Introduction: Pyelonephritic scarring is the most common cause of Unilateral Renal Paranchymal Disease that ultimately could be terminated to hypertention, Renal Insufficiency and Chronic Renal Failure. Regarding to the importance of diagnosis and treatment of Urinary Tract Infection and VUR as risk factor for renal scar formation. This study was performed in according to probability of renal scar in patients with urinary tract infection.

Objective: Survey the Renal Scar in Children with VUR and Urinary Tract Infection in 17 Shahrivar Hospital in Rasht(2004-2006).

Materials and Methods: In this descriptive study all children with UTI and VUR who had referred or hospitalized in 17 shahrivar Clinic Hospital were selected. For evaluating Renal Scar, DMSA Scan was performed 4-6 months after the last UTI. The received findings were evaluated by SPSS soft ware and T.test.

Results: Of 128 patients, 106 cases were female and 22 patients were male of 33 patients with VUR 24 cases were female and 9 patients were male. Among 66 checked renal units, 42 units had VUR and 24 units had not Reflux. Renal Scar was observed in %64 units with VUR and %12.5 of renal units without VUR. In male patients 11 units and in Female's children 31 units had reflux. Renal scar was observed in upper pole (%47); middle pole (%22) and lower pole (%31). Renal Scar was observed in 11 units of the right kidney and 16 units of the left kidney.

Conclusion: The results of this study showed that male and age lower than 2 years old had higher risk for VUR and scar. There is no relationship between the age of children and Renal Scar (P>0.05). According to these findings, evaluation and early diagnosis of VUR and Renal Scar and proper treatment are very important.

Key words: Children/ Cicatrix/ Urinary Tract Infections/ Vesico- Uretoral Reflux