



Editorial

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The editorial board of Karnataka Paediatric Journal takes pleasure in presenting July–September 2021 issue. This issue has very interesting articles including review articles, original articles, case reports, and journal reviews.

Sleep plays a critical role in the neurological development, cognition, and behaviour of children. About 15–40% of children in different parts of the world are reported to have sleep problems. In a school-based study in India, the prevalence of sleep disorders was found to be 47.5% with 12.7% having snoring and 4.8% having features of sleep-disordered breathing. Other sleep problems reported included nocturnal enuresis, sleep talking, bruxism, nightmares, night terrors, sleepwalking, bedtime resistance, and insomnia. Despite the high prevalence in community studies, there is inadequate information on how many of them get to visit a paediatric pulmonologist or sleep specialist in India. Paediatric polysomnographies performed in children are predominantly for obstructive sleep apnea. This study describes the characteristics of patients and the polysomnography findings in a dedicated sleep clinic in India. This study aids a paediatrician to understand the spectrum of sleep disorders in children and indications for polysomnography.

The original research article, “An observational study of salivary C-reactive protein as a potential novel non-invasive biomarker of neonatal sepsis,” is a study supported by the Indian Academy of Paediatrics Research Award for medical undergraduates.

Since sepsis is the number one cause of neonatal mortality in India, effective diagnostic tools are of paramount importance. Blood culture is the current gold standard for the diagnosis; however, results of microbial growth can take up to 2 days to be detected and are positive only in 25–40% of cases. Thus, a culture-independent tool for sepsis diagnosis is the need of the hour. Previously, blood-derived serial C-reactive protein (CRP) measurements have been demonstrated to help rule out and prognosticate neonatal sepsis. Nevertheless, due to limited blood volumes in neonates, repeated blood draws for serial CRP, hence, a non-invasive monitoring using saliva-based CRP may be a feasible choice for the investigation of neonatal sepsis. Difficulty in collecting neonatal saliva samples, lack of studies about salivary CRP cutoff, comparison with blood culture, neonatal salivary flow dynamics, salivary proteins, and confounding factors, comparison of different methods such as enzyme linked immunosorbent assay and turbidimetry, and paucity of Indian studies are the reasons why salivary CRP has not yet been translated into clinical practice.

Coronavirus disease 2019 (COVID-19)-associated stroke in a toddler is a case report which describes the association of paediatric stroke with COVID-19. The authors report a 2-year-old child with sudden onset focal neurological deficits and high COVID antibody titers occurring soon after a brief episode of cough and cold. Magnetic resonance imaging brain suggested infarct in posterior cerebral circulation.

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Another interesting case report is “*Salmonella typhimurium* meningitis in an exclusively breastfed infant.” It is a known fact that *Salmonella*-related meningitis brings greater morbidity and mortality than that caused by other bacteria. This case report describes a case of *Salmonella typhimurium* meningitis in a male child aged 5½ months who presented with fever, poor feeding, and irritability. *S. typhimurium* was isolated from cerebrospinal fluid. The child was treated with intravenous antibiotics for 4 weeks and he recovered completely.

Systemic toxicity in a child after topical cyclopentolate eye drops application in an 8-year-old girl who presented with complaints of mild pain in both eyes for 1 month. Cyclopentolate 1% eye drops were administered twice to the child at 5 min interval in both eyes. The child developed neurological symptoms like restless. She had altered behaviour, visual hallucination, and difficulty in walking. She was disoriented with slurred speech. She had ataxia and frequent tightening of limbs with jerky movements after 30 min of installation of eye drops. The child recovered completely with symptomatic treatment.

An unusual deep-seated hemangioma successfully treated with propranolol in 4 months old.

Letter to the Editor COVID-19: The quintessential wave of change and challenge for the norms effective, with minimal side effects even in poor resource settings.

Anaphylaxis – A white elephant in the emergency room is a practical description of scenarios faced during handling a

case of anaphylaxis in the paediatric population, the most common triggers for allergies include food, insect bites, medications, and environmental allergens, whereas in a quarter of the cases, the trigger is unknown. Anaphylaxis is the most fatal form of an allergic reaction. The National Institute of Allergy and Infectious Diseases in 2006 provided a standardized set of clinical criteria for the diagnosis of anaphylaxis which is universally followed till date. Despite these well-established criteria, the incidence of anaphylaxis is highly variable and in majority of patients is still undiagnosed. This can be attributed to the highly variable and atypical presentations in the paediatric population and difficulty in applying all the standard criteria in infants and small children. This leads to both under- and over-diagnosis of anaphylaxis in the busy paediatric emergency. Even though mortality related to anaphylaxis is rare, a high index of suspicion should be kept improving the diagnostic accuracy of a typical presentations. Proper allergen avoidance advice as well as anaphylaxis action plans are an essential part of treatment. On the other end of the spectrum, all cases of recurrent idiopathic anaphylaxis should be thoroughly worked up keeping in mind about mimics as important differentials to prevent overdiagnosis and needless treatments.

Wish you all a happy reading!

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