

Difficulties and Mistakes in Diagnosis During Brucellosis in Children

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Abstract : Recent years, due to the development of tourism, migration and globalization, brucellosis has spread to non-endemic regions of the country in Azerbaijan and this disease has become one of the main priority areas of medicine. In our daily practice, we face patients with specific symptoms of brucellosis and also infected with this disease but misdiagnosed. It should also be noted that the symptoms and signs of brucellosis are very diverse, and since none of these signs are specific enough to confirm the diagnosis, it creates difficulties in its timely detection and diagnosis. The main purpose of the work. Therefore, the main goal of the work is to investigate the cases of delay in making the correct diagnosis in children with brucellosis and the mistakes in this matter. Material and method. 50 children with brucellosis between the ages of 6 months and 17 years were examined. The medical history and anamnesis of these children were collected, clinical-instrumental examination, and serological tests for brucellosis were performed. Patients were divided into 2 groups, taking into account the specificity of symptoms and the timely diagnosis Results. Group I included 15 (40%) children aged 3-17 years. The main specific symptoms of brucellosis in these patients; persistent or long-term fever, night sweats, arthralgia were observed. In addition to specific symptoms, anamnesis and a specific serological test confirmed the diagnosis of brucellosis. 30 (60%) patients included in group II were misdiagnosed. 3 patients (up to 1 year) were diagnosed with sepsis, 6 with acute rheumatic fever, 10 with systemic diseases, 2 with tuberculosis, 5 with Covid 19, and 4 with unspecified fever. However, we included serological tests. detailed examination revealed the presence of brucellosis in them. As can be seen, compared to group I (40%) children included in group II (60%) In modern times, brucellosis manifests itself with its own characteristics, that is, imitating a number of other diseases, which has led to wrong diagnosis. Conclusion. Thus, the lack of specificity of clinical symptoms during brucellosis in children makes diagnosis difficult, causes mistakes and non-recognition of the disease. With this in mind, physicians in predominantly endemic and even sub-endemic areas should remain vigilant about this disease and consider brucellosis in the differential diagnosis of almost every unexplained medical problem until proven otherwise.

Keywords : brucellosis, pediatrics, diagnostics, serological tests

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