



PREVALENCE OF PEDIATRIC PLEURAL EFFUSION IN A TERTIARY GOVERNMENT HOSPITAL IN MANILA; A 3-YEAR RETROSPECTIVE STUDY



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BACKGROUND

In the Philippines, a country with a considerable burden of pediatric respiratory illnesses, pleural effusion remain relatively under explored. Understanding the local epidemiology and clinical characteristics is crucial for optimizing patient care and resource allocation.

METHODOLOGY

This is a Retrospective descriptive study conducted in a tertiary government hospital in Manila, Philippines. Records from June 2020 to June 2023 of pediatric patients diagnosed with pleural effusion were assessed. Extracted data covered demographics, clinical symptoms, causes, treatment approaches, and outcomes.

CONCLUSION & RECOMMENDATION

Pleural effusion in children, thought of low prevalence, presents multifaceted challenges in Manila. This study highlighted the utility and limits of chest radiographs and showed **ultrasound** as promising tools for effusion evaluation. Manila's government hospitals, facing resource constraints and prevalent infectious diseases, must navigate pleural effusion intricacies, underscored by the microbial data and resistance patterns found in this study. Pleural effusion's varied mortality rates based on underlying conditions emphasize the need for vigilant, comprehensive care.

OBJECTIVES

The purpose of this study is to determine the prevalence of pediatric pleural effusion in a tertiary government hospital in Manila from 2020-2023.

RESULTS

The prevalence rate of pleural effusion is 0.8% based on overall number of admissions for the past three years. Most are **males** (63%), with 33% **aged 0-5 years**. Most (50.7%) stayed under two weeks. The primary symptom was a **cough** (23.8%), with **pneumonia** as the main cause (34.3%). Chest X-rays detected effusions in 67 patients, and 80% of **ultrasounds confirmed** this. Most **effusions** (80%) were exudative. Key microbes included a methicillin-resistant *Staphylococcus aureus* strain and others. **Mortality was 22.3%**, but 77.61% improved, with an average hospital stay of 20.20 days.

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