THERAPY AND EVOLUTION OF NEONATAL MENINGITIS

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We present to you the results of a study performed on a group of newborns in Colentina Infectious Diseases Hospital, regarding therapy and evolution of neonatal bacterial meningitis. A number of 70 newborns were admitted between 1.01.1981-31.12.1994 with acute bacterial meningitis. Etiology was confirmed in 43 cases, as follows: gram-negative baccili in 36 cases and gram-positive and gram-negative cocci in 7 cases. The etiologic agent was not isolated from CSF culture of 27 out 70 newborns. The therapy was applied in strict correlation with clinical symptomatology and etiology. Presumtive antimicrobial therapy was required in unidentified cases of neonatal meningitis. The average time interval between onset of illness and initiation of antibiotic therapy was 1,8 days (range 0,5-5 days). The main scheme for the initial antibacterial therapy consisted of association of Ampicillin+Gentamicin+Cotrimoxazole in 43 cases. In correlation with the antibiotic sensitivity tests, some alternate schemes were also considered as follows:

Ampicillin	+	Gentamicin (10)
Ampicillin	+	Chloramphenicol (5)
Colistin	+	Gentamicin (2)
Penicillin	+	Chloramphenicol (2)
Cephalosporines III	+	Gentamicin (5)

We used monotherapy with cephalosporines of the third generation, given single daily dose in 3 cases of neonatal bacterial meningitis with N.meningitidis, Str.pneumoniae and E.colli, with very good results in 10-14 days of therapy. We mention 3 initial treatment failures: one requiring adjunctive antibiotics and in 2 cases it was needed to change to alternative antimicrobial therapy. As usual among newborns the progress of the disease was severe. The clinical outcome of our patients was the following: 28 of 70 patients recovered completely from their bacterial meningitis and cure rate was of 38,5%. The persistance of somatoneurological sequelae at hospital discharge consisting of motor defects, nerve palsy, seizures and hydrocephalus were recorded in 16 cases. During the 13 years, 26 of 70 patients died: 22 with gram-negative bacillary meningitis, 2 with unidentified meningitis, 1 with group B streptococcus and 1 with Str.pneumoniae.