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Prevalence and outcome of atypical bacterial pneumonia among children in Mulago hospital Uganda: preliminary findings

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Aim: To determine the prevalence and outcome of Mycoplasma pneumonia among children with acute respiratory symptoms in Mulago hospital, Uganda.

Methods: Children aged 2 months up to 12 years who presented with cough and/or difficult breathing and fast breathing at the Paediatric emergency unit of Mulago national referral hospital were recruited. A clinical history and physical examination were done. Blood samples were taken off for ELISA to determine the presence of *Mycoplasma pneumoniae* IgM antibodies. Children who had positive IgM antibodies were considered to have acute infection. All participants were followed up for a maximum of seven days or discharge/death, whichever came first. Data was analysed using descriptive statistics.

Results: Of the 72 children whose blood samples have been analysed, 46(63.9%) were male, and 66 (91.8%) were less than five years old. IgM antibodies against *Mycoplasma pneumoniae* were positive in 16 (22.2%) of the 72 children, and of these, 15 (93.8%) were less than five years. The majority of the children with positive *M. pneumoniae* IgM antibodies presented with signs of respiratory distress. Three (3) children died, and one of them had positive *M. pneumoniae* IgM.

Conclusion: Atypical bacterial pneumonia is common among children less than five years and presents with severe symptoms, requiring hospitalization. This is contrary to previous literature that referred to atypical pneumonia as ‘walking pneumonia’ and a disease of older children. The results highlight the importance of considering atypical bacteria among ‘under-fives’ who present with features of pneumonia. Research to identify predictors of atypical pneumonia and simple point of care diagnostics for atypical bacteria is recommended.

Declaration of Interest

Declaration
Authors declare no conflict of interest

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