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Primary vesicoureteral reflux in Iranian children (Review)

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Abstract

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Background: Experience with vesicoureteral reflux (VUR) differs in different centers and there are plenty of controversies. Objective: The aim of this study was to evaluate the outcome of primary VUR complications and the rate of recurrence of UTI. Methods: The medical charts of all infants and children with primary VUR who were followed up by two nephrologist were reviewed. During 19 years (1985-2004), 330 patients (271 females, 59 males) with 496 refluxing ureters were followed up as primary VUR. Results: The patients' age at diagnosis was 54 days to 16 years (Mean: 4.1 years) and the mean duration of follow-up was 4.5 years. Urinary tract infection (UTI) was the presenting symptom in 95% and fever was recorded in 35% of cases. Frequencies of different grades of VUR at initial investigation were 10%, 35%, 30%, 13% and 12% for grades I to V, respectively. Recurrence of UTI in VUR of grades I to V, were 22.2%, 18.1%, 20%, 23.4% and 17.9% respectively. Follow-up voiding cystourethrogram revealed resolution of VUR in 55%, improvement in 27.5%, no change in 12%, and deterioration in 5.5%. Complications such as chronic renal failure and hypertension were observed in 13 and 13 patients, respectively. Renal scarring was present in 52% of boys and 29% of girls. Conclusion: The present study indicates that symptomatic primary VUR is more common and has better prognosis in girls. Recurrence of UTI is not related to the grade of VUR.

Author keywords

Urinary tract infection; Vesicoureteral reflux

Indexed Keywords

EMTREE medical terms: adolescent; child; chronic kidney failure; controlled study; deterioration; disease severity; female; fever; follow up; human; hypertension; infant; Iran; kidney scar; major clinical study; male; medical record review; micturition cystourethrography; nephrologist; outcome assessment; prognosis; recurrent disease; review; symptom; urinary tract infection; vesicoureteral reflux

MeSH: Adolescent; Antibiotic Prophylaxis; Child; Child, Preschool; Female; Humans; Infant; Iran; Kidney; Male; Recurrence; Vesico-Ureteral Reflux

Medline is the source for the MeSH terms of this document.

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