## **Results**

The present study included forty infants and children with critically illnesses due to one or more organ system failure who were admitted to the pediatric Intensive care unit of a New Children Hospital, Benha University Hospital and Cairo University hospital from February 2009 to October 2009 twenty two were males and eighteen were females. Twenty sex and age matched health children constituted the control group. The results of our study are presented in the following tables and figures.

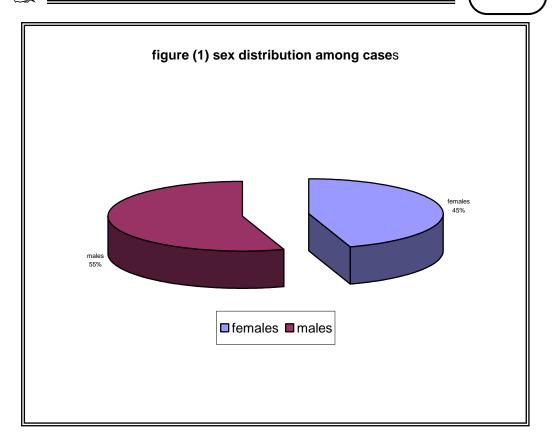
Table (1): Distribution of the study groups according to sex

Study group	Cases		Control		Total	
Sex	No	%	No	%	No	%
Males	22	55	12	60	34	56.7
Females	18	45	8	40	26	43.3
Total	40	100.0	20	100.0	40	100.0

Chi-square  $(X^2) = 0.14$  p > 0.05

Table (1) and fig(1,2). Show: sex distribution among patients under study males in the studied cases represented 55% and females represented 45%. While in controls, males represented 60% and females representing 40%.

Results



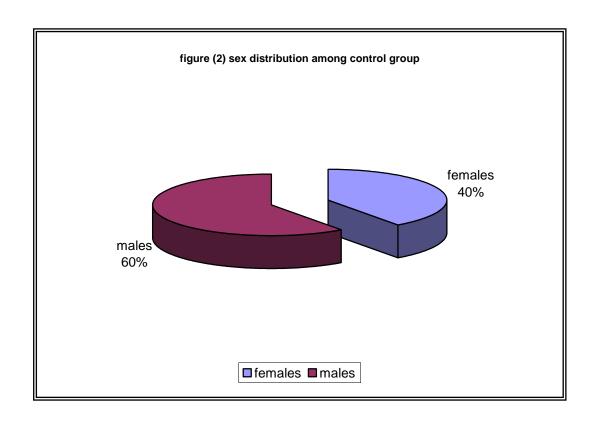


Table (2): Causes of system failure among patient under study.

Causes	No	%
1- Pneumonia.	11	27.5%
2- Gastro enteritis.	10	25%
3- Post-surgical admission.	9	22.5%
4- Sepsis.	8	20%
5- C.N.S infections.	2	5%
Total	40	100.0

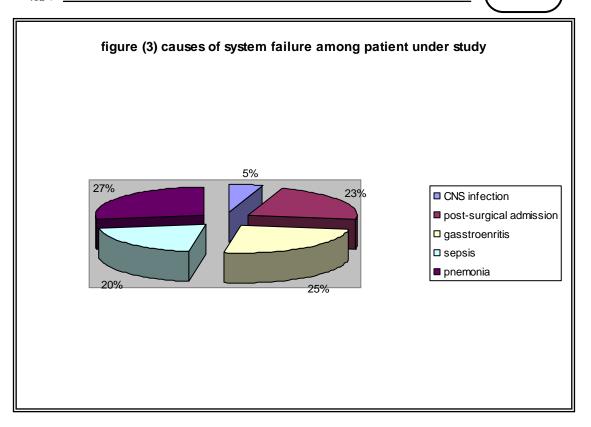
Table (2) and figure(3) show: that pneumonia represents the majority of cases 27.5% while C.N.S infections represent the minority of cases 5%.

Table (3): Distribution of system failure among patients under study according to type of system failure

Type of SF	No	%	P
	[Pat-n= 40]		
Single	26	65.0	. 0.05
Multiple	14	35.0	< 0.05

Regarding the number of system failure table (3) and fig (4) show that there is a statistically significant difference between cases have single system failure (65%) and cases have multiple single failure (35%) P < 0.05.





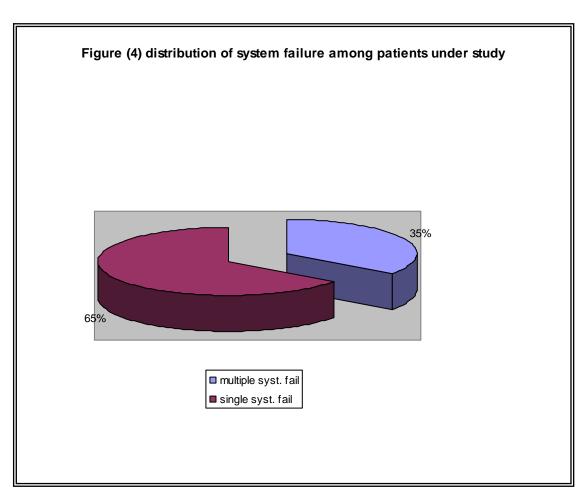




Table (4): Mean total serum zinc (ug %) in critically ill patients on admission and day three and their significance to control.

Mean total	Control group	Critically ill patient	P value
serum	No. = 20	No = 40	
Zinc (ug%)			
On admission	00 + 2.1	50 5 L 5 0	0.001
Mean ± SD	$89 \pm 3.1$	52.5± 5.3	< 0.001
At 3 days		55.1.1.0.1	. 0. 001
Mean ± SD	_	$55.1 \pm 9.1$	< 0.001

Table (4) and figure(5) show mean total serum zinc in studied group. There is highly statistically significant difference in mean total serum zinc between critical patients and control group on admission as well as on day three of admission P < 0.001.

Table (5): Mean total serum copper (ug %) in critically ill patients on admission and day three and their significance to control.

Mean total serum Cupper(ug %)	Control group No. = 20	Critically ill patient No = 40	P value
On admission	111 + 2.1	07	
Mean ± SD	$111 \pm 3.1$	97	
At 3 days		102	< 0.05
Mean ± SD	-	102	

Table (5) shows mean total serum copper in studied group that there is no statistically significant difference serum of copper between critical patients and control group on admission as well as day three of admission. P > 0.05.



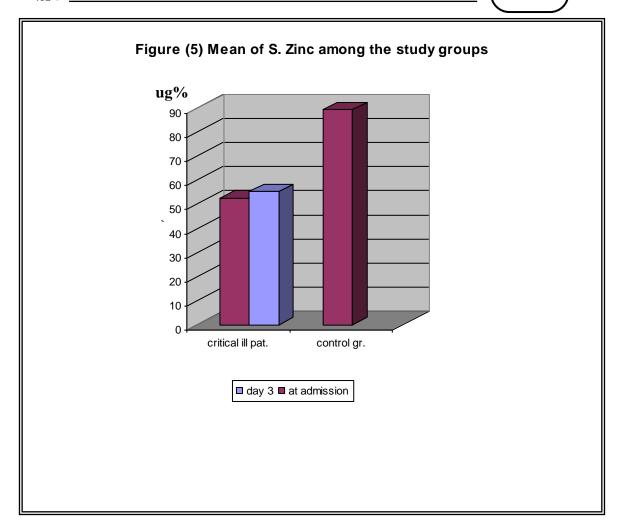




Table (6): Mean total serum zinc (Ug%) at admission and 3<sup>rd</sup> day among the study cases according to number of system failure.

Mean total	Single S.F.	multiple S.F	P
serum zinc	no = 26	No. 14	
(ug%)			
On admission			
Mean ± SD	$54.6 \pm 4.01$	47.2± 4.1	< 0.001
AT 3 <sup>rd</sup> day			
Mean ± SD	59.1 ± 7.6	49.6±8.5	< 0.01

Table (6) and figure (6) show mean total serum zinc among patients under study according to the number of system failure. There is highly statistically significant difference in mean total serum zinc between critically ill patients with single organ system failure and those with multiple organ system failure on day of admission (P< 0.001) as well as on day three of admission.

Table (7): Mean total serum zinc (ug %), leucocytic count, absolute band count and C. reactive protein on admission and 3 day later and their significance to the control group.

	Control	Critically ill patient (n=40) (study group)				
	$\begin{array}{c} \textbf{group} \\ \textbf{No} = \textbf{20} \\ \textbf{Mean} \pm \textbf{SD} \end{array}$	On admission Mean ± SD	P Vs control	At 3 <sup>rd</sup> day mean ± SD	P vs control	
total serum zinc (Ug%)	89 ± 3.1	52.5 ± 5.3	<0.001	55.1±9.1	< 0.001	
Total leucocytic . Count( mm3/ L)	$12.53 \pm 1.1$	14.14 ±8.1	> 0.05	$12.26 \pm 5.6$	> 0.05	
Absolute band count ( mm3/ L)	96.1±0.3	93.03±5.6	< 0.01	35.25±10.85	< 0.001	
C- reactive protein mg/L	4.6± 0.8	27.8±30.03	<0.001	34.43±35.6	< 0.001	



Table (7) and figures(7,8,9) show there are statistically difference between control group and critically ill patients on admission and day 3 regarding mean total serum zinc, CRP and band count (P < 0.001) while no statistically difference was found between them regarding TLC (P > 0.05).

Table (8): Mean total serum zinc (ug %) in relation to outcome.

Mean total	control	Survivors	P.	Non	P
serum zinc (ug	group	No = 36	VS	survivors	VS
%)	No = 20		control	No = 4	control
On admission	89 ±3.1	52.4±5.4	P1<	49±3.1	< 0.01
Mean ± SD			0.001		
At 3 <sup>rd</sup> day	-	57±8.8	P2<	46±2.4	< 0.01
Mean ± SD			0.001		

P value between survivors and non survivors is < 0.01 on admission and 3 days later.

Table (8) and figure (10) show: mean total serum zinc in relation to outcome. There is a highly statistically significant difference in mean total serum zinc between survivors and the control group on admission as well as day 3 after admission (P< 0.01). The same result was found between the non survivors and the control group (P< 0.01). There was also a statistically significant difference between survivors and non survivors on admission and day 3 after admission (P< 0.01).

