PART V

 $\underline{S} \ \underline{A} \ \underline{M} \ \underline{M} \ \underline{A} \ \underline{R} \ \underline{Y} \qquad \underline{A} \ \underline{N} \ \underline{D} \qquad \qquad \underline{C} \ \underline{O} \ \underline{N} \ \underline{C} \ \underline{L} \ \underline{U} \ \underline{S} \ \underline{I} \ \underline{O} \ \underline{N}$

SUMMARY AND CONCLUSION

This is a clinical and radiological study on sixty patients with lower respiratory tract infection presenting with respiratory difficulty ranging from just working alae has to audible grunting.

The study pointed out that serious lower respiratory tract infections occur mostly in the first year of life with predominant affection of males.

All the cases were subjected to a full history, full clinical examination including general and local examination followed by radiological study.

The groups studied include twenty five (25) cases of bronchopneumonia, seven (7) cases of lobar pneumonia, ten (10) cases of penumonia complicated with pleural effusion, twelve (12) cases of bronchiolitis and six (6) cases of bronchicetasis.

The radiological study of all the groups revealed that reontgenic study is one the most important steps in confirming the clinical diagnosis and may even reveal the nature of the disease. However, it cannot be taken as a solitary indicator in evaluating the success of

treatment as in most cases of lobar pneumonia and effusion, residual radiological signs remain after the clinical cure for a long period that may last for months.