

Poster presentation

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The outbreak of Rheumatic Fever in the city of Trieste

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The annual incidence of rheumatic fever (RF) in developed countries is 0.5–1/100.000 among subjects at risk. The decline in the incidence of RF observed in the past decades was mostly attributed to improvement of the living conditions and the availability of medical care and widespread use of antibiotics. However, focal outbreaks were reported in the past, probably due to resurgence of rheumatogenic strains.

We described the series of RF diagnosed in the city of Trieste between April 2007 and April 2008. 10 cases of acute RF were reported, 7 females and 3 males. The median age was 6.11 years (4.6–10 years). 7/10 of patients had a history of recent upper respiratory tract infection, 3/10 received oral amoxicilline. Migratory polyarthritis occurred in 50% of patients; carditis in 60% (in 2 of 10 valvular regurgitation was demonstrated by echocardiography without accompanying auscultatory evidence). Chorea occurred in 30% of patients. No patient presented erythema marginatum or subcutaneous nodules. All patients with chorea received corticosteroids with prompt resolution of symptoms except one who responded to valproate and IGIV.

The annual incidence of rheumatic fever in the past ten years in our region was 4–6/100000 per year. We reported the RF outbreak that occurred in the last year in Trieste (43/100.000 population), the capital of the Friuli Venezia Giulia region. This resurgence was focal and not country-wide.

We observed a relatively low incidence of arthritis and high incidence of corea, probably due to a particular rheumatogenic strain that we were unable to identify so far.