The obstacles of intussusception low rates and the failed of the follow-up since rotavirus vaccine implementation in Côte d’Ivoire

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Background
Intussusception remains the more important surgical complication with rotavirus vaccine. His early diagnosis lead to appropriate treatment with a good outcome. however, intussusception diagnosis basing on Brighton criteria is a real challenge in our regional hospital because of the poor technical platform. The surgical follow up of the patient failed because of the low socio economic of the parents.

Objective
For understanding the causes of the failed of the follow-up and the low rates of intussusceptions cases registered since implementation of rotavirus vaccine 2017; 6 March in Côte d’Ivoire.

Method
Five paediatric surgeon’s teams make a round in the means health regions to meet physicians with three questions.
Are they knowing that the most common complication of rotavirus vaccine complication was intussusception?
What were the means diagnosis of intussusception (emana, ultrasound and CT) they have?
How did they managed the intussusception cases diagnosed?
At the total of 45 intussusceptions registered, twenty-three had less than 8 months. They need follow up.

Results
Physicians in regional hospital are unaware of such complications, then they do not think about intussusception when the children had an abdominal painful after vaccine.
The regional hospital has no ultrasound to diagnose early intussusception, or radiologist came to the hospital twice the week. When, the diagnosis was performed, the patients are referred in another hospital so far to be treated.

At the total of the twenty-three child which need a follow up, eleven had a follow up, twelve did not because the parents evoked economic difficulties to pay for transport.

Conclusion
Regional training for the physicians will surly improve post vaccine intussusception rate.
It important to define patient pattern for a best management, for the vaccinated child with suspected symptoms of the intussusception.
For an appropriated follow up, the patient transport must be supported by health’s minister.
Key Words: Child, follow-up, Rotavirus, Vaccine