

## Microalbuminuria: An index of severity in childhood meningitis

Roine, Irmeli

Urinary albumin excretion (AE) was determined by a sensitive method (below dipstick positive values, 15 to 300  $\mu$ g/minute) in 68 children with meningitis during 48 hours after hospital admission; 51 children had bacterial meningitis (BM) and 17 had aseptic meningitis. AE (results as mean  $\pm$  sd) during 0 to 24 hours was higher ( $P < 0.001$ ) in patients with BM ( $36 \pm 40 \mu$ g/minute) than with aseptic meningitis ( $7 \pm 5 \mu$ g/minute), albeit no cutoff value distinguished the two conditions accurately. In BM the clinical course (uneventful, intermediate, complicated, fatal) correlated with AE of 0 to 24 hours ( $r = 0.34$ ,  $P < 0.05$ ) and AE of 25 to 48 hours ( $r = 0.63$ ,  $P < 0.001$ ). Cerebrospinal fluid protein concentration 24 to 36 hours after initiation of treatment correlated with AE of 25 to 48 hours ( $r = 0.34$ ,  $P < 0.05$ ). An index obtained by dividing AE by the weight of the child predicted the severity of clinical course more precisely (77% sensitivity, 85% specificity) than AE alone. Hence renal AE i