

## 요로감염 영아에서의 일차성 방광요관역류

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### Primary Vesicoureteral Reflux in Infants with Urinary Tract Infection

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**Purpose** : This study was performed to identify factors relating with the resolution of primary vesicoureteral reflux (VUR) in infants.

**Material and methods** : We reviewed 183 infants (M:F=149:34) diagnosed as urinary tract infection (UTI) between February 2002 and July 2007 at Sanggye Paik Hospital. The diagnosis of UTI was made by culture from a urine specimen obtained by suprapubic puncture (n=97), catheterization (n=83), or collection bag method (n=3, twice positive culture of same organism). All of the infants were performed renal ultrasonography, DMSA scan and voiding cystourethrography (VCUG) study. Follow-up imaging consisted of contrast VCUG or direct isotope VCUG at interval of 1 year. We evaluated the relationship of clinical and laboratory finding, radiologic finding in infants with VUR.

**Results** : Among 51 VUR patients, 28 infants had grade I-II, 8 infants had grade I-II and the other 15 patients had grade III-V. Abnormal finding include hydronephrosis in renal ultrasonography was not correlated with severity of VUR. However the incidence of renal defects in DMSA scan showed a tendency of direct correlation between severity of VUR in female patients ( $p<0.001$ ). Resolution rate was not correlated with severity of VUR in male and female patients. The resolution rate was higher for male patients with unilateral VUR than bilateral ( $p<0.001$ ). But unilaterality had not any affect on VUR resolution in female VUR patients ( $p=0.786$ )

**Conclusion** : According to our findings, grade of VUR was not correlated with resolution rate in infants with primary VUR. The unilaterality of VUR was correlated with resolution of VUR in male patients only.

**Key Words** : 방광요관역류, 요로감염, 영아

Vesicoureteral reflux, Urinary tract infection, Infants