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How often delirium occurs after anesthesia for digestive surgeries ? RADMILA TRAJKOVA, ZORICA MARKOVSKA RISTOVSKI, JASMINA JANDRESKA

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Abstract

Early detection and treatment of delirium and pain after digestive surgery are important for quick post-operative recovery. Delirium is associated with poor outcomes such as: prolonged hospital stays, functional decline, increased use of medicaments. The aim of this study is to examine the application of confusion assessment method (CAM) and BOMK test as diagnostic tool for delirium among hospital patients in intensive care unit and to examine the level of pain as possible cause of patients' perturbations.

Material & Methods: Sixty-five patients prior to their digestive surgeries were included who preoperatively did not have impaired cognitive function according to BOMK test. These patients were ASA1 and ASA2, 30 male and 35 female more than 60 years old. Delirium assessment was diagnosed with two tests, BOMK and CAM in ICU during the first 7 postoperative days. In each patient the level of pain was measured with visual analogue scale (VAS) for the same 7 days.



Biography:

RADMILA TRAJKOVA currently Working as an Anesthesiology&Intensive Care Specialist at GOB 8 Septemvri

Speaker Publications:

1. Промените и нивното влијание врз дизајнирање на осигурителните друштва и осигурителните интермедијари 2. Post-Anesthesia Cognitive Dysfunction of Aged Patients in One Day Surgery

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