

Sp.Iss.113

Pitfalls in the management of shock in children..... The concept story

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Abstract

The clinical signs and symptoms of shock in newborns and children are often more subtle compared to adults. Recurring, avoidable factors for optimal outcome include failure of health care workers to recognize shock at the time of presentation. Children are able to compensate a shock state for longer periods than adults resulting in a sudden, sometimes irreversible, cardiopulmonary collapse. Different forms of shock, their therapy, and frequent errors are depicted and illustrated with practical examples. Early recognition of shock in children is crucial for optimal outcome but is not always obvious. Clinical experience, gut feeling, and careful and repeated interpretation of the vital parameters are essential to recognize and effectively treat the various forms of shock.

CONCLUSIONS:

The management of children with shock is challenging. Some pitfalls include, Failure to recognize nonspecific signs of compensated shock (ie, unexplained tachycardia, abnormal mental status, or poor skin perfusion) could be due to Inadequate monitoring of response to treatment Inappropriate volume for fluid resuscitation (usually too little for children with sepsis or hypovolemic shock, but possibly too much for those with cardiogenic shock also Failure to reconsider possible causes of shock for children who are getting worse or not improving , Failure to recognize and treat obstructive shock

Biography:

Dr. Said Eldeib is a Pediatrician and Neonatologist whose experience in the field spans 15 years, backed by a higher education degree from Royal College of pediatrics and child health (UK) as well as a master degree in pediatrics from Ain Shams University in Egypt, one of the oldest and top-ranking universities in the MENA region. He is known for his astute skills in evaluation and a strong passion for improving healthcare and wellbeing. He is pioneering an open and contextual evaluation model based on constructive responses, which has led in the creation of new methods to improve pediatric healthcare, neonatology, and pediatric nutrition. Dr. Said has established this model following his years of experience in medical practice, research and evaluation, and teaching and administration in hospitals and medical universities in the region, including Egypt, Kuwait, and the UAE. Dr. said has published his studies in reputable international journals in neonatology and pediatric nutrition. He has also presented his findings in prestigious international conferences and symposia.



2nd International Pediatrics, Infectious Diseases and Healthcare Conference, October 26-27, 2020 Webinar

Abstract Citation:

Said Moustafa M, Eldeib, Pitfalls in the management of shock in children..... The concept story, 2nd International Pediatrics, Infectious Diseases and Healthcare Conference; Webinar, October 26-27, 2020 (https://pediatrics.infectiousconferences.com/