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Session type **Abstract Submission**

Topic **12. ZOONOSES, VECTOR-BORNE AND EMERGING INFECTIONS**

Presentation preference **CLINICAL AUDIT OR SURVEY**

Abstract title **CLINICAL CHARACTERISTICS OF DENGUE SHOCK SYNDROME CHILDREN WITH RECURRENT SHOCK IN SURABAYA**

Background

The most common danger in dengue virus infection is shock. Some patients will also suffered from recurrent shock.

To objective of this study was to describe clinical characteristics of children who had dengue shock syndrome (DSS) with recurrent shock

Methods

This cross sectional study was conducted in children hospitalized with dengue hemorrhagic fever (DHF) grade III and IV in Dr. Soetomo Hospital Surabaya from Januari 2013 until December 2014. Data were collected from medical record. We used the criteria from WHO-SEARO 2011 Guideline.

Results

One hundred and two children with DSS were included, mostly with DHF III (93.1%). Female outnumbered male (3:2) and the median age was 7 years (range 1-16). Twenty six children (25%) got recurrent shock. Among those group, all children had the history of fever previously, 50% had headache, and 70% reported abdominal pain. Most children with recurrent shock (88.5%) showed good nutritional status. One patient had the first episode of shock on the end of second day of illness, three others on the third day, and the rest on the fourth day and after. Fourteen children showed bleeding history, mostly as petechiae on the skin. Only half of the patients showed positive Rumpel Leede (RL) test on admission. The lowest thrombocyte level was 4000 /cmm. The highest hematocrite level was 56%. Eighty five percents children had hematocrite level above 40% since the first day of hospitalization.

Conclusions

Most DSS patients had DHF III. Recurrent shock only happened in one forth of those children. Many had pain in many parts of the body but less than half showed bleeding manifestations. The first episode of shock could happened as early as second day of illness. Many patients had high hematocrite level.

Keywords
recurrent shock
, dengue shock syndrome
, children
clinical characteristics



CLINICAL CHARACTERISTIC OF DENGUE SHOCK SYNDROME CHILDREN WITH RECURRENT SHOCK IN SURABAYA



Dominicus Husada, Ahmad Zakky Mashuri, Leny Kartina,
Dwiyanti Puspitasari, Parwati Setiono Basuki, Ismoedijanto

Division of Infectious Diseases and Tropical Pediatrics, Department of Child Health
School of Medicine, Airlangga University / Dr. Soetomo Hospital, Surabaya, Indonesia

BACKGROUND

In Indonesia, and many parts of the world, dengue virus infection (DVI) is still a major problem. Dengue shock syndrome (DSS) is the most common severe complication of DVI, especially in children. Some of those children with DSS will get more than one episodes of shock. There are limited studies related to recurrent shock in DVI.

OBJECTIVE

To describe clinical characteristics of children with DSS who suffered from recurrent shock.

METHODS

Design : Cross sectional study, medical record based
Location : Pediatric ward Dr. Soetomo Hospital Surabaya
Duration : January 2013 - December 2014
Subject : Children with DSS who had recurrent shock

Guideline Criteria : WHO-SEARO 2011

We reviewed :

- Complete history
- Clinical features
- Laboratory results
- Treatment
- Outcome

of children with DSS admitted to Dr. Soetomo Hospital in 2013-2014

RESULTS

- There were 102 children with DSS eligible for this study, mostly with DHF Grade III (93.1%)
- Female : male = 3 : 2
- Median age : 7 year-old
- Recurrent shock : 26 children (25%)

FOR RECURRENT SHOCK GROUP (n=26)

- Mostly with good nutritional status (88.5%)
- Bleeding history : 14/26, with petechiae as the major manifestation
- Only half showed positive tourniquet test on admission
- Lowest thrombocyte level : 4000/cmm

Table 1. The time of first episode of shock among DSS children with recurrent shock

DAY OF FEVER	N (Total:26)
Second	1
Third	3
Since the 4 th day	22

Table 2. Most common clinical features among DSS children with recurrent shock

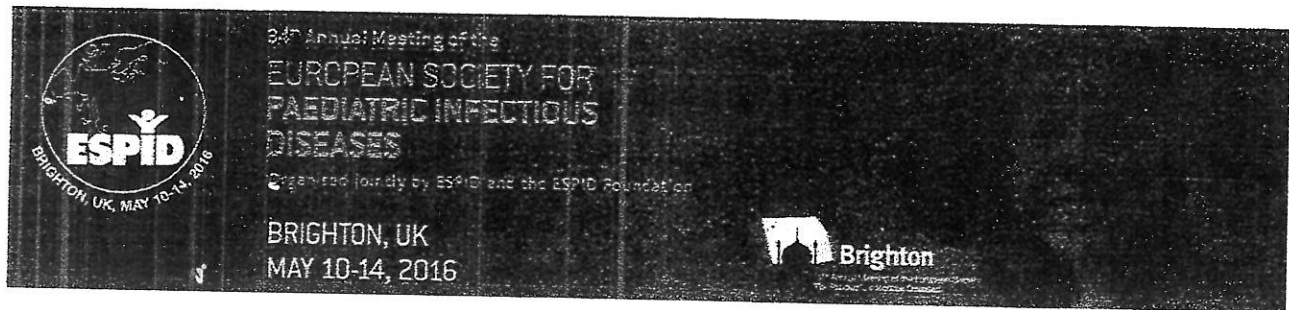
CLINICAL FEATURES	%
Fever	100
Headache	50
Abdominal pain	75

Table 3. Clinical features found more commonly in recurrent shock group

CLINICAL FEATURES	% IN RECURRENT SHOCK GROUP
Gastrointestinal bleeding	40%
Positive tourniquet test	37.5%
Hepatomegaly	31.9%
Hyponatremia	29%

CONCLUSIONS

Most DSS children had DHF Grade III. Recurrent shock happened only in one fourth of those patients. Many had pain in many parts of the body but less than half showed bleeding manifestations. The first episode of shock could happen as early as second day of illness.



CME/CPD Certificate

This is to certify that

DOMINICUS HUSADA

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participated in the

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