VII. ULUSLARARASI HİPOKRAT TIP VE SAĞLIK BİLİMLERİ KONGRESİ

(3-4 Eylül 2021)

VII. INTERNATIONAL HIPPOCRATES CONGRESS ON MEDICAL AND HEALTH SCIENCES

(September 3-4, 2021)



DRAFT - TASLAK

BİLDİRİ ÖZETLERİ KİTABI

ABSTRACT BOOK

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2021

Presentation ID / Sunum No= 220

Oral Presentation / Sözlü Sunum

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Anesthetic Management of a Patient With CHARGE Syndrome

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Özet

Introduction: CHARGE syndrome (Coloboma, Heart defects, Atresia of choanae, Retardation, Genital anomalies, and Ear anomalies) is a rare genetic disorder with some important anesthetic implications. In this paper we report a case with CHARGE syndrome having urinary diversion operation due to posterior urethral valve. In particular, we wanted to bring attention to the anesthetic management of the case, because of some important implications, including possible airway management problems and cardiac pathologies. Case: A 16-year-old boy (54 kg, 159 cm) with the diagnosis of CHARGE syndrome was scheduled for elective double-Monti operation. The patient had left agenetic and right hydronephrotic kidney, neurogenic bladder and posterior urethral valve that resulted in postrenal chronic kidney disease. He had previous operations, including repair of tracheoesophageal fistula and esophageal atresia, spina bifida repair, nephrostomy, gastroplication for gastroesophageal reflux, orchiopexy, diagnostic or interventional esophagoscopies and bronchoscopies as well. There were no anesthesia-related complications previously. His airway examination was normal, including Mallampati score of 3, normal neck extension, and mouth opening. Thoracic computerized tomography obtained nine months before the procedure was examined and necessary measurements performed. Intravenous anesthesia induction and rapid sequence intubation was performed smoothly. Surgery was completed without any complications. There were no complications in the postoperative care unit and the vital signs were within normal limits. The patient was discharged after 7-day smooth follow-up at the ward. Discussion/Conclusion: CHARGE syndrome is a rare genetic disorder with some important anesthetic implications to be considered when dealing with the patients perioperatively. Some airway abnormalities have been reported in the patients with CHARGE syndrome, which can result in problems with intubation. Anesthetic management of a patient with CHARGE syndrome should include careful preoperative airway examination, including radiographic studies; difficult airway preparation; consideration of the cardiac pathologies; consideration of gastroesophageal reflux; and meticulous postoperative follow-up.

Anahtar Kelimeler: CHARGE, Anesthesia, Anesthetic Management, Airway

Anesthetic Management of a Patient With CHARGE Syndrome

Abstract

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Keywords: CHARGE, Anesthesia, Anesthetic Management, Airway