TARK 2021

Hibrid Kongre •

Türk Anesteziyoloji ve Reanimasyon Derneği

55. Ulusal Kongresi

28 - 31 Ekim 2021

Susesi Otel / ANTALYA

bir nefes umut...



BİLDİRİ ÖZETLERİ

S-009

Continuous Hemoglobin Measurement during Frontal Advancement Operations Can Improve Patient Outcomes

Ayten Saraçoğlu[1], Ruslan Abdullayev[1], Mustafa Sakar[2], Bülent Saçak[3], Feyza Girgin İnceköy[4], Zeynep Zuhal Aykaç[1]

[1]Marmara University School of Medicine, Department of Anesthesiology and Reanimation
[2]Marmara University School of Medicine, Department of Neurosurgery
[3]Marmara University School of Medicine, Department of Plastic and Reconstructive Surgery
[4]Marmara University School of Medicine, Department of Pediatry and Pediatric Intensive Care

Giriş / Amaç:

Pediatric cranioplasty operations are challenging due to potential to have significant intraoperative blood loss. Massive hemorrhage may necessitate blood transfusion, which can cause many complications.[1,2] Radical-7 Pulse CO-Oximeter (Massimo Corporation,Irvine,CA) can provide continuous hemoglobin concentration (SpHb) measurements noninvasively. In this study, we aimed to evaluate the effects of SpHb measurements on the patients' perioperative blood management and postoperative outcomes.

Gereç ve Yöntem:

For this retrospective case control study, after Ethics Committee approval, data of the pediatric patients aged from 2 months to 2 years that undergone fronto-orbital advancement surgery for plagiocephaly and trigonocephaly with American Society of Anesthesiologists physical status I-II between 2018-2021 in our hospital were collected. The patients' demographic and clinical characteristics; intraoperative hemodynamic and laboratory variables, including blood gases; intraoperative blood losses; amount of the transfused blood products; postoperative intensive care unit (ICU) and hospital lengths of stay were collected. SPSS was used for statistical analysis. $P<0.05$ was considered significant.

Bulgular:

Data of 42 patients were collected, of which 29 were males (69%). Plagiocephaly was the diagnosis in 24 (57.1%) patients and others had trigonocephaly. In 16 of the patients perioperative SpHb monitorization was made (Group S). Other patients that were managed conventionally were considered as a control group (Group C). Demographic, clinical and perioperative hemodynamic characteristics of the patients were comparable between the groups. Groups S had significantly less perioperative packed red blood cell (PRBC) transfusion ($P=0.015$), less postoperative bleeding ($P=0.013$) and less ICU length of stay ($P<0.001$), compared with the Groups C (Table 1). There was positive correlation between PRBC transfusion amount and ICU length of stay ($r=0.459$, $P=0.003$).