



AB018. Myocardial dysfunction in septic shock

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Abstract: Septic shock is a serious, life-threatening condition often associated with multiple organ dysfunction. The incidence of myocardial dysfunction in sepsis is unknown as well as its impact on survival, independently other organ system dysfunction. Adolescent aged 15 years with clinical signs of septic shock was admitted to the Intensive Care Unit. The previous five days he has occasionally hyperthermia and complained of dry cough and diarrhea. In laboratory investigations dominate leukocytosis, thrombocytopenia, very high parameters of inflammation, moderately elevated levels of nitrogen products,

hypoalbuminemia, hypoproteinemia and metabolic acidosis. After initial therapy of septic shock, patient was still haemodynamically unstable with significant signs of myocardial dysfunction. Transthoracic echocardiography showed left ventricular dysfunction (FS =18%), with mitral regurgitation 1+, tricuspid regurgitation 2+ and pericardial effusion. We continued with intensive inotropic stimulation, antibiotics, corticosteroides and correction of metabolic disorders. During further hospitalization clinical and laboratory recovery were a significant, but with long-term maintenance depending on inotropes. After two weeks the boy was discharged home with regular clinical and echocardiographic findings.

Keywords: Sepsis; shock; myocardial dysfunction

doi: 10.21037/pm.2018.AB018

Cite this abstract as: Pejcić L, Jankov MR, Vasić K. Myocardial dysfunction in septic shock. *Pediatr Med* 2018;1:AB018.