Clinical Outcome and Determinants of Mortality among Children with Septic Shock and Severe Sepsis Admitted To Pediatric Intensive Care Unit

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Abstract

Background: Pediatric severe sepsis and septic shock remain a highly prevalent public health problem in critically ill children and are associated with substantial morbidity and mortality. But limited data exists on the international burden of severe sepsis and septic shock in critically ill children in our country as well, so this study will help to see the gap.

Objective: The objective of the study was to assess clinical outcome and determinants of mortality of severe sepsis and septic shock in Pediatric intensive care unit at Ayder Comprehensive Specialized Hospital.

Data Processing and Analysis: Data was extracted from patients’ charts using a checklist, entered, cleaned and analysed using SPSS version 20.0

Method: Hospital based cross-sectional retrospective study was conducted among children 1 month to 18yrs who were admitted to Pediatric intensive care unit, Ayder Comprehensive Specialized Hospital with the assessment of severe sepsis and septic shock from September 1, 2012 -August 30, 2017 Hemodynamic and laboratory parameters which discriminate survivors from non-survivors were evaluated.

Result: A total of 57 cases (29 [50.9%] female) were enrolled in the study with a prevalence of 4.65% and the median (interquantile range) age of the enrolled patients was 1.5 (0.08, 16) years. Of whom 18(31.6%) were survivors and rest 39(68.4%) were non-survivors. The overall mortality was determined individually by the presence of respiratory failure at admission and use of steroid (AOR, 95% CI; 0.01, 0.01- 0.27) and (AOR, 95 CI, 0.01; 0, 0.22) respectively.

Conclusion: The prevalence of severe sepsis and septic shock was found to be low but the mortality of severe sepsis and septic shock was high and mortality among children with severe sepsis and septic shock was determined by the presence of respiratory failure at admission and use of steroid.

Key words: septic shock, determinant, mortality

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