

Asia Pacific Conference of Emerging viral infections 2017

19th and 20th September 2017 at Sri Lanka Foundation Institute

Centre for Dengue Research
Faculty of Medical Sciences
University of Sri Jayewardenepura

PP04

Can we predict the need of blood transfusion in children with Dengue Haemorrhagic Fever (DHF)? A descriptive analysis in a single unitPathirana R.P.H.K¹, Wickramasinghe W.A.AK¹, Madubashini L.A.D.T¹, Chathurika A.A¹, Gamage M.A.M.N¹

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Aim: Only some patients who develop dengue fever will progress into DHF. All those with DHF do not need blood transfusions. As these bleeds are concealed it is important to identify any parameters to predict bleeding. Therefore, the research was carried out to identify any factor/s to predict possibility of a haemorrhage, which needs blood transfusion in Paediatric DHF patients.

Methods: Retrospectively data was collected and analyzed from the bed head tickets of all children admitted to a single unit during June 2017 and July 2017.

Results: There were 55 DHF patients. Out of them there were 04 who were less than 1 year old. Majority (65%)were in the 6-12 years age group. Twenty three (46%) of them were residents from the Dehiwela Mount Lavinia municipal council area. Out of them, 07(12.7%) needed blood transfusions due to suspected bleeding, depending on clinical parameters and dropping Packed cell volume. None of them had overt bleeding. All who needed blood transfusions, had their platelet counts less than 20x10⁹/L (p=0.002) at the time of suspected bleed. None of them who needed blood had taken NSAIDs prior to admission. Analysis of APTT (p=0.92) and PT/INR (p=0.62) values and Venous PH (P=0.76) and Hco3 (p = 0.78) values in relation to the time of suspected bleed did not show any significance. Most of them (>90%) did not have serum albumin levels to analyze.

Conclusions: Although low platelet count has shown a significant association with bleeding in DHF children, more extensive studies are necessary to identify predictors to suggest the need for blood transfusion.