

Dilated cardiomyopathy (paediatrics)

Patients with dilated cardiomyopathy may be in shock .

- Myocarditis is one of the most common causes of dilated cardiomyopathy in previously healthy children.

The clinical manifestations of myocarditis are multifaceted.

- It may be in the foreground
 - myocardial dysfunction,
 - dysrhythmia
 - or there may be clinically "silent" cases.

The most common symptoms are

- tachycardia
- tachypnoea

The most common life-threatening dysrhythmias are

- supraventricular
- ventricular tachycardia

Rarely can we encounter rhythm disorders - AV blocks ,

- which lead to bradycardia and hypotension and are also extremely serious.

The approach to a patient with myocarditis or another form of dilated cardiomyopathy is the same as for patients in cardiogenic shock, but the response to traditional inotropic therapy may not be sufficient. In addition, infusion of catecholamines in these cases can lead to the development of severe dysrhythmias.

- When a diagnosis of myocarditis is made, it is recommended
 - corticosteroid therapy or better HDIVIG at a total dose of 2 g / kg (1 g / kg / day for 2 days).
 - These drugs can modulate the inflammatory response.
- ECMO is the treatment of choice .

Links

Source

- HAVRÁNEK, Jiří: *Shock* . (managed)

related articles

- Shock (pediatrics)
- Rival
- Cardiogenic shock
- Cardiomyopathy
- Dilated cardiomyopathy