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Acute downhill course of emergency presentation of undiagnosed mediastinal masses: Flow charts and critical care management**Uma Hariharan**

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Mediastinal masses can be a great mimic. Their acute presentation can be mistaken for bronchial asthma, COPD exacerbation or subglottic stenosis. A high index of suspicion, eternal vigilance and prompt action can be rewarding in the emergency scenario. Mediastinal masses can have varied presentations or may even remain silent till very late. There have been numerous articles on anaesthetic management of patients with mediastinal masses. There is paucity of literature on acute presentation and course of events following airway interventions in patients with unrecognized mediastinal masses in the emergency or critical care set up. In the event of their presentation as reactive airway disease or acute airway obstruction, the possibility of a mediastinal mass must be kept in mind, when standard medical management fails to improve the condition or when definitive airway management worsens the condition further. Positive pressure ventilation can be disastrous as it leads to further increases in intra-thoracic pressures. A cardiothoracic surgeon opinion should be sought early and femoral vessels may be cannulated prophylactically. Facilities for institution of life support or ECMO (Extra-Corporeal Membrane Oxygenation) is desirable in intensive care units caring for patients with mediastinal masses.

Biography

Uma Hariharan is a teaching faculty at the Ram Manohar Lohia Hospital, India. She has extensive experience in safe anesthesia for cancer surgeries and robotic surgeries. She is also trained in ultrasound-guided regional anesthesia and Palliative Medicine. She has more than 75 publications to her credit, including several book chapters. She is also on the Editorial Board of several reputed national and international journals. She is also an expert at Trauma care and is an instructor for Advanced Trauma Life Support (ATLS). She is also an expert at Hospital Management (PGDHM). She also has keen interest in Transplant anesthesia and Critical Care.

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