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A study to evaluate e.c.g. Changes in children with kawasaki disease

Dipsikha Jana

Department of Pediatric Medicine, India

Kawasaki disease, is an autoimmune disease that manifests as a systemic necrotizing medium-sized vessel vasculitis with varying degree of myocarditis with or without coronary artery aneurysm in acute and convalescent phase. This can interfere with the normal electrical activity. A Case Control Observational Study was done with 39 cases and same no of age and sex matched healthy control from january 2019 to June 2020. Objectives were to find any E.C.G. abnormalities in the acute and convalescent phase, comparison of the E.C.G. changes between complete and incomplete Kawasaki cases and relationship between E.C.G. changes of acute phase with different acute inflammatory markers of blood and coronary changes. We found that in acute phase the case group showed significantly more mean of heartrate, P wave voltage, QTc interval, QT dispersion, Tpeak-Tend dispersion whereas PR interval was significantly shorter than control. The frequency of Right axis and TpeakTend dispersion but the mean P wave voltage, PR interval were insignificantly higher in Complete Kawasaki case group. The E.C.G. changes showed significant correlations with Aneurysm, Plateletcount, ESR, CPK-MB and LDH. In the follow ups the decrement of the mean heart rate, PR interval, QT dispersion, Tpeak-Tend dispersion were not significant until 6months. In conclusion there is significant evidence of myocarditis in the acute and convalescent phase. Ventricular depolarization axis shifted more toward right side. E.C.G. indicates long term defect in transmural dispersion of ventricular repolarization and are most significantly correlated with Aneurysm. Acute ECG abnormalities are insignificantly more evident in Incomplete Kawasaki cases.

Biography

Dr.Dipsikha Jana has completed her M.B.B.S. at the age of 24 years from West Bengal University of Health Sciences ,India and pursuing postgraduation studies in Pediatric Medicine from West Bengal University of Health Sciences,India.

jdipsikha@gmail.com