

Study of clinical features and outcomes of acute encephalopathy in critically ill patients

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Background and objectives:

Acute encephalopathy is common in a broad spectrum of critically ill patients and is strongly associated with hospital mortality and short and long term cognitive impairment in survivors. There are many risk factors including hypoxia, dysglycemia, hypotension, sepsis and metabolic derangements along with preexisting cognitive impairment and severity of their primary illness which contribute to poor neuropsychological and functional outcome in these patients. Objective is to study the clinical features and outcome of acute encephalopathy in 75 critically ill patients admitted with various primary illnesses other than primary CNS illness, admitted as inpatients with regular follow up over a period of at least 3 months.

Materials and Methods:

75 critically ill patients admitted in manipal tertiary care center, old airport road Bengaluru, were involved in this study after applying inclusion and exclusion criteria. The duration of the study was from June 2015 to December 2016. It was a prospective study where in clinical features and various risk factors contributing to neuropsychological and functional outcome of these patients were studied in detail, with follow up period of about 3 months.

Results:

It was observed that 60% of them were males and 40% were females. Mean age of our patients was 60 years. Out of 75 patients, 34 (45.3%) had second visit or early mortality. Among the sample studied 35 (46.6%) had septic encephalopathy where as 9.3% had viral encephalopathy, hepatic encephalopathy, uremic encephalopathy each. During the second visit among survivors of 41 patients, 33(80.4%) of them had impaired MMSE and 26.9% had features of depression .33.3% of patients in the age group above 80yrs had features of depression compared to other younger age groups.

During the third visit (after 3months) majority of older age group had poor functional outcome as measured by MRS grading compared to the younger age with statistical significance ($P < 0.001$). And also during this visit it was observed that older age groups had cognitive dysfunction (with ACE below 82) with statistical significance ($P < 0.001$) in other words 65% of those surviving patients with cognitive dysfunction (ACE below 82) were in the age group 61-80years.

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Conclusion:

There is an increasing prevalence of acute encephalopathy in critically ill patients. Risk factors like hypotension, older age groups and sepsis and prolonged hypoxia, dysglycemia are associated with poor neuropsychological and functional outcome. Early recognition of these risk factors and necessary timely measures to avoid them may help to reduce global burden associated with this illness.

Biography:

Roopa K.G is a graduate in Neurology with qualified skills in diagnosis management and prognosis of diseases related to brain, spine, nerves and muscles .I have undergone an efficient training in subspecialties such as stroke, neuromuscular disorders, demyelinating disorder electrophysiology and epilepsy. I am also trained in general medicine from reputed government collage (BMC &RI) Bengaluru. I have an experience working as general physician for few years with good reviews .