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Brain abscess evacuation in children with cyanotic congenital heart disease (Atresia Pulmonal, Ventricular Septal Defect, Patent Ductus Arteriosus, Overriding Aorta, Mayor Aorto Pulmonary Collateral Artery) – A case report

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Brain abscesses secondary to heart disease are the most frequent etiology with an incidence reported of 5 to 18 %, commonly found in developing countries.[1] Any patient with congenital heart disease, particularly cyanotic, the development of focal neurologic abnormalities or evidence of increased intracranial pressure must be considered as indicative of the possible presence of a brain abscess until proved otherwise.[2] In this case, a 5 year old male children with Atresia Pulmonal, Ventricular Septal Defect, Patent Ductus Arteriosus, Overriding Aorta, Mayor Aorto Pulmonary Collateral Artery had history of multiple generalized seizure, altered mental state E3V3M5 and fever. Head CT scan imaging shown multiple cystic lesion at right temporoparietal lobe with subfalcine and transtentorial herniation suggesting brain abscess. We diagnosed this patient had a brain abscess and start the initial antibiotic treatment with ceftriaxone and metronidazole. Then, the neurosurgery team decided to evacuate the abscess via surgical boorhole. The surgical procedure had done with general anesthesia was successfully performed without altered hemodynamic condition and followed by post operative care management in PICU for two days. The patient fully recovered 20 days after surgery. Anesthetic management in patient with brain abscess and cyanotic congenital heart disease is very challenging because we will face multiple problems. The patients tends to fall further to hipoxic condition, with hypercoagulable states, possibility of cyanotic spell and cardioplumonary circulation instability along with increased intracranial pressure and its complication, and how to maintain the balance of brain protection anesthesia and its impact on already impaired cardiopulmonary system.

Biography

Muhammad Aulia Arifahmi has completed his first degree at the age of 25 and now a resident of Department of Anesthesiology and Intensive care at Faculty of Medicine, Brawijaya University. This is the first paper to submit at international meeting as a student.

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