

# Sepsis in Children: Hemodynamic Management

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#### **Pediatric Shock: Definition**

#### **Definition of shock**

"Circulatory system failure to supply oxygen and nutrients to meet cellular metabolic demands"

Oxygen supply ≠ Oxygen demand (Oxygen delivery)

#### **Principles of shock management**

- Increase O<sub>2</sub> delivery
  - Optimize O<sub>2</sub> content
  - Improve cardiac output
- Decrease O<sub>2</sub> demand
- Correct metabolic derangement

## **Oxygen delivery (DO<sub>2</sub>)**

- $DO_2 = CO \times CaO_2 \times 10$ 
  - Remember: CO depends on HR, preload, afterload, and contractility
- CaO<sub>2</sub> = Hgb x 1.34 x SaO<sub>2</sub> + (PaO<sub>2</sub> x 0.003)

 Remember: hemoglobin carries more than 99% of oxygen in the blood under standard conditions

One of the goals of treatment is to restore cardiac output

**Sepsis in children: Hemodynamic changes** (Flow, pressure, resistance)

 Flow: Decreased Cardiac output (CO)
Pressure: Decreased Blood pressure (Decreased Perfusion pressure)

 Resistance: increased (high SVR) or decreased vascular Tone (low SVR)

Goal of septic shock treatment is to restore effective tissue perfusion and to normalize cellular metabolism.

**Tissue perfusion** is a function of both **pressure** (BP) and flow (CO).