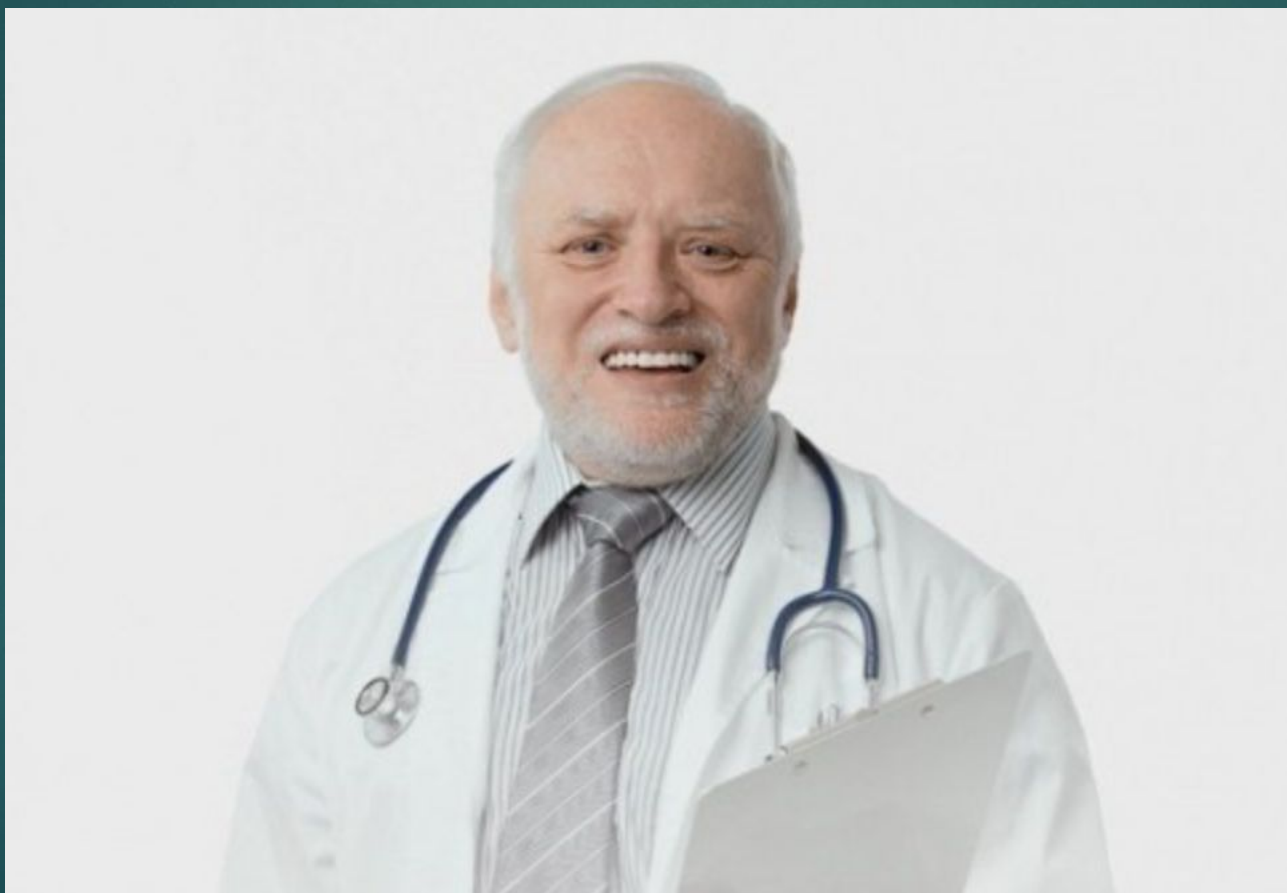


Задание

СЛУЧАЙ В КЛИНИКЕ

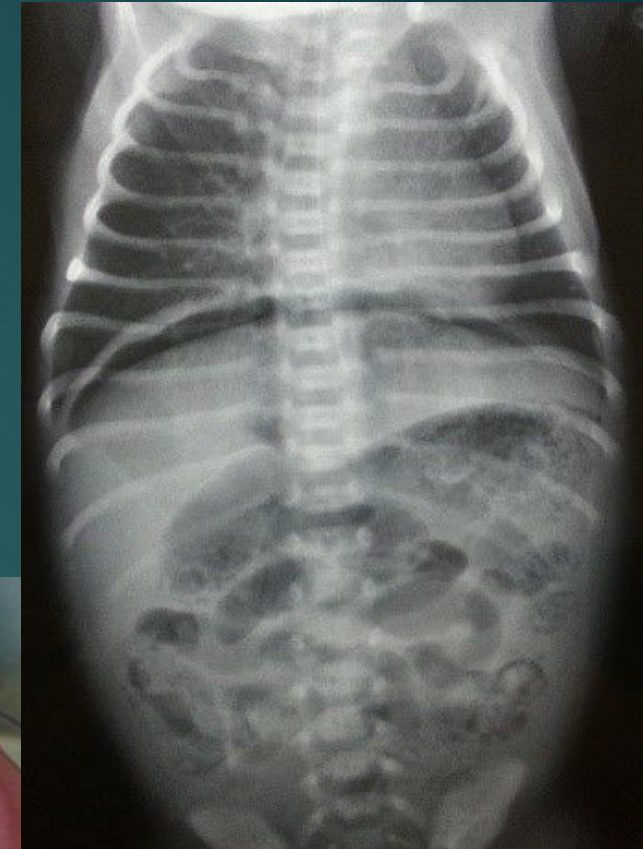
Ситуация: вы дежурите со старшим коллегой в больнице



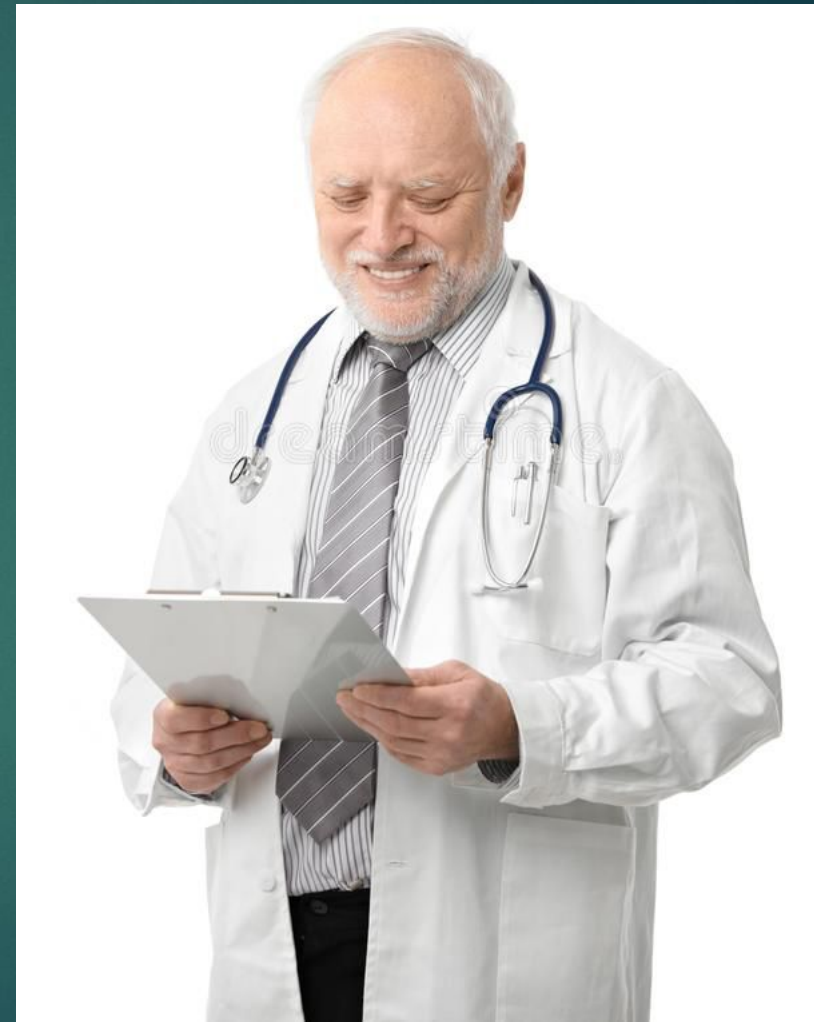
Профессор Гарольд

Пациент:

- ▶ **Пол** – мужской
- ▶ **Возраст** – 18 дней
- ▶ **Жалобы:** вздутие живота, примеси крови в стуле, отсутствие стула последние 2 дня
- ▶ **Status praesens:** состояние крайней тяжести, пациент адинамичен, ЧСС -180 уд/мин, t^0 – 35,8
- ▶ Родился на 35 неделе гестации, масса при рождении - 2000 г.



Надо оперировать, думаю только вот, какой
объем операции возможен... **Недавно** читал
зарубежную новую статью про лечение таких
пациентов, там **живот «не зашивали»** при
отклонении определенных параметров, не
помню только каких... Найди, посмотри, а...
Встречаемся через 10 минут в операционной...



ОТВЕТ:

Диагноз – некротизирующий энтероколит (НЭК)

Параметры:

- ▶ Температура (гипотермия)
- ▶ Уровень лактата (ацидоз)
- ▶ Активированное протромбиновое время (коагулопатия)

Верный запрос:

20:39 LTE

ncbi.nlm.nih.gov

NIH U.S. National Library of Medicine [Log in](#)

PubMed.gov

Open abdomen NEC

[Advanced](#) [Create alert](#)

Filters Timeline Best match

4 results

Postoperative outcome in premature infants with open abdomen.

Lambertz A, et al. Hernia 2014. PMID 24509864

Laparostomy is a surgical treatment method in which the peritoneal **cavity** is opened anteriorly and deliberately left **open**, hence often called

Filters (1) Timeline Best match

5 results

TEXT AVAILABILITY

- Abstract
- Free full text
- Full text

ARTICLE ATTRIBUTE

- Associated data

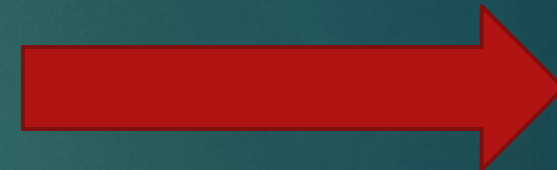
ARTICLE TYPE

- Books and Documents
- Clinical Trial
- Meta-Analysis
- Randomized Controlled Trial
- Review
- Systematic Reviews

PUBLICATION DATE

- 1 year
- 5 years
- 10 years

AGE



Нужная статья и информация

Filters applied: 1 year. [Clear all](#)

Damage Control Surgery in Neonates: Lessons Learned From the Battlefield

G Suren Arul et al. J Pediatr Surg. 2019

Show details

Full-text links

Cite

...

Abstract

Introduction: Mortality for neonates requiring surgery for serious pathology such as NEC, remains high. Damage control surgery (DCS)

Abstract

Introduction: Mortality for neonates requiring surgery for serious pathology such as NEC, remains high. Damage control surgery (DCS) has evolved as an operative strategy in battlefield trauma that sacrifices the completeness of the initial surgery to address the deadly triad of acidosis, hypothermia and coagulopathy. This approach is now used routinely in sick adults with nontrauma surgical emergencies. Here we describe our experience of using DCS in neonates.

Results: 27 neonates (median age 21 days; gestation 29 weeks; weight 1200 g; M:F 18:9) underwent DCS. Diagnosis (NEC 23, volvulus 2, meconium peritonitis 1, spontaneous perforation 1). Preoperative physiology: median temperature 35.5 °C, lactate 3.7, Activated prothrombin time 49; on a median of 1 inotrope (range 0 to 4); 19 had surgery on the intensive care unit. Surgery involved resection of dead bowel with the ends ligated and the abdomen left open. Operation took 38 min (26-80 min) and crew-resource