



-Effect of Total versus Partial Splenectomy in Producing a Hypercoagulable State in Traumatized Children

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Abstract:

Abstract: Background: Trauma is one of the first 10 leading causes of death in the first 4 decades of life. Approximately 10-15% of pediatric trauma patients suffer abdominal injuries, with blunt injuries to the spleen and liver being the most frequent. Trauma is the leading cause of death and disability in children, and truncal trauma is the second most frequent cause of death among children, after head injury. Thromboembolic complications are common in traumatized patient and the affection of spleen in the trauma or complete loss of it by total splenectomy rise the risk especially in the first 72 hours. Purpose of the study: To evaluate the effect of partial versus total splenectomy on hypercoagulable state of traumatized children. Methods: In a prospective, nonrandomized, single-center study cross sectional study, we recruited 20 patients who had trauma recently. Half of our patients` population underwent a partial splenectomy and the rest of them had total splenectomy. Results: There is no increase after partial splenectomy nor total splenectomy in first 3 days in platelets count. In both groups, the patients showed normal prothrombin time and concentration with normal INR level and normal fibrinogen level. Conclusion: There is no significant effect on hypercoagulable state between partial and total splenectomy in the first 3 days postoperative in traumatized children.

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