

#### **Pediatric Intensive Care Unit (PICU)**

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Home care ventilation: a retrospective evaluation of our experience based on the current national practice



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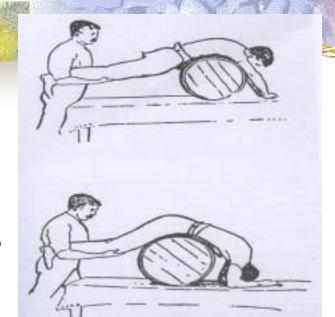
Alena Kurasova

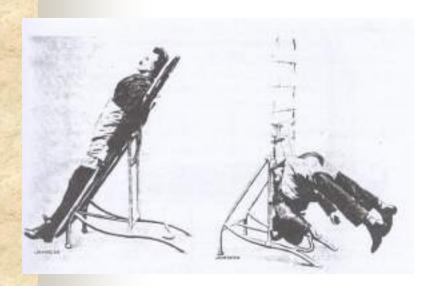
MUDr. Iveta Larysova

MUDr. Marketa Nowakova

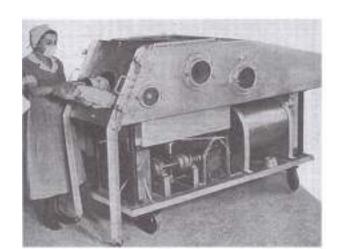
# Once upon a time...

Galenos





Beginning of the 19th century



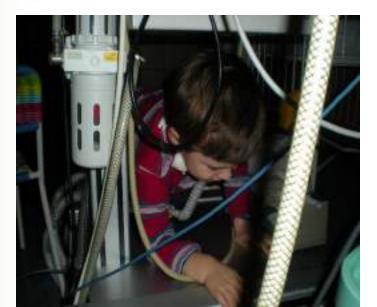
### Home care ventilators

- Low weight
- High reliability
- Easy to use
- Effective alarm
- Oxygen connection
- Standby generator



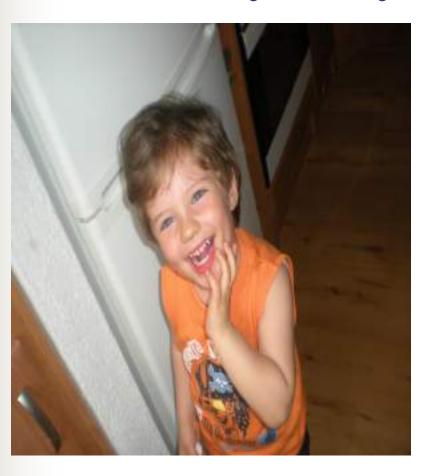
# History of HCV/Czech Republic/

- Long-term ventilation
- → necessary permanent stay within ICU in past



- Individual cases at home/15 years ago/
- family initiative
- No legal support
- No community support
- National committee for realization of home care ventilation /since January 2003/
- 2004 first home care ventilators released

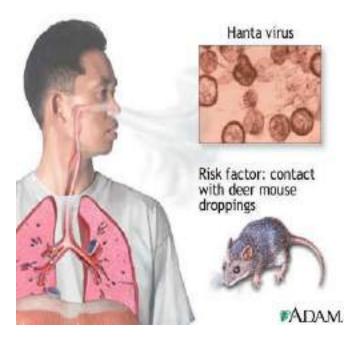
### Case study /July 2009/



- 2,5- year- old boy admitted to PICU
- 3- day history of fever, no seizures, nausea and vomitting
- Clinical presentation

### PICU stay /22.7.- 24.12. 2009/

- Critical condition
  /pulmonary oedema,
  heart failure, sepsis,
  cerebral oedema,
  myelitis, coma vigile/
- Swine flu?Antivirotics
- Hantaviral infection



#### No sedation

- Stable condition
- Ventilation /SIMV/
  - does not cough,swallow, does not obeycommands
- Consious but eye contact disputable
- Motor fidgetiness
- Unable to open mouth /central etiology/



# Nursing care

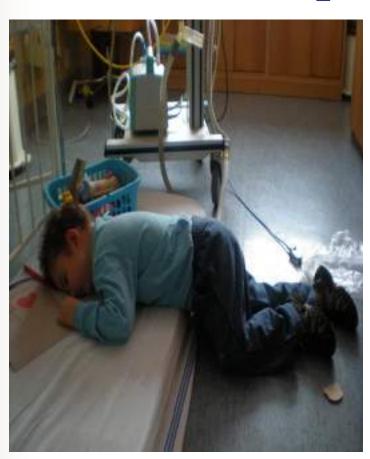
- Complex nursing care
- Family- centred care
- Use of basal stimulation



# Family- centred care



# Richard's hospital room





## Intensive rehabilitation



# Family- centred care



### Discharge on X-mas Eve

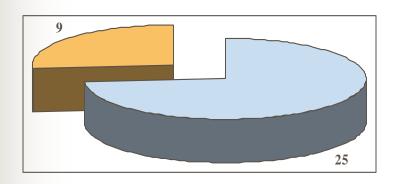


- Conventional ventilation
- PEG
- Toilet trained
- Recognises familiar faces
- Uses his own sign language

#### Process of realization HCV

- HCV is indicated by PICU doctor
- Application for HCV
- Committee agreement (home care ventilator available within 28 days)
- Technical equipment

### Children on HCV in CZ



- 34 children discharged on HCV
- 9 of them from FNO
- 5 children died

 $\square$  other hospitals  $\square$  FNO

#### Pros & Cons

- Parents' proximity
- Family / familiar environment
- Low cost versus higher expenses of a child's hospitalisation

- Social economic family status
- Limited financial support for carers / 3 hrs per day /
- limited number of home care agencies
- lack of methodical instructions for Health Insurance Companies about financial support

### Richard at home

