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Delirium, withdrawal and the degree of Nutrition: Are there associations?

his is a retrospective and observational study to evaluate the diagnosis of delirium and withdrawal syndrome in patients undergoing mechanical ventilation (MV) in a Pediatric Intensive Care Unit (PICU) in Rio de Janeiro from 01 January to 30 June 2011 and correlate with the degree of nutrition. We recruited 61 charts and data were obtained through analysis of medical records, following a standardized questionnaire: 42% were normal weight, 39.4% were malnourished and 18.6% were overweight. The most frequent main diagnoses were pneumonia (34.5%), congenital heart disease (24.6%) and brain tumors (10%). The mean age of patients was five months. We diagnosed two cases of withdrawal syndrome and one case of delirium. Patients were classified according to the degree of nutrition through the Z score and to severity through the PRISM score. Data were collected regarding the demographic aspects, need for MV with the respective total time, main diagnosis and clinical outcomes. Malnutrition promoted an increase in MV use, especially when associated with: less than one year of age, children admitted to the PICU with low severity scores and patients admitted for respiratory problems. MV time was significantly higher in the group of malnourished children, but mortality was not significantly affected by the presence of malnutrition. There was one case of delirium associated with

withdrawal syndrome and the patient was classified as eutrophic. The patient with a diagnosis of withdrawal syndrome who did not present delirium was classified as overweight. We found no association between the degree of nutrition of the patients and the diagnosis of withdrawal syndrome and/or delirium. More studies are needed to assess the nutritional status of patients and the association of these conditions with delirium and/or withdrawal syndrome. It is possible that during the study period there was no association between the degree of nutrition and the main outcomes due to the presence of comorbidities as well as the low occurrence of delirium and withdrawal syndrome.

Speaker Biography

Gabriela Sousa Moreira, Brazilian, 28 years old, graduated from College of Medicine of Marília in 2014. She completed the specialization in pediatrics in 2017 at the Hospital of Child and Maternity of São José do Rio Preto, and in the same year she received the pediatrician degree by Brazilian Society of Pediatrics. She did internships in Pediatric Oncology at University Hospital Motol in Prague, Czech Republic, in 2013, in Neonatal ICU of Hospital São Francisco Xavier in Lisbon, Portugal, in 2018. She presented works at the following congresses: XIII Brazilian Congress of Pediatric Intensive Medicine in 2014, XVII Latin American Congress of Pediatrics in 2015 in Peru; XIV Latin American Congress of Pediatric Intensive Sof Pediatric Intensive Medicine in 2014, XVII Latin American Congress of Pediatric Intensive Sof Pediatric Intensive Medicine in Software Software In 2015 in Peru; XIV Latin American Congress of Pediatric Intensive Software Software Software Intensive Care in 2017 in Paraguay, among others. She was a member of the state team of the Renewed Universities Ministry of the Catholic Church. She participated in the dissemination of the World Delirium Awareness Day in Brazil in 2017. Currently, she works in Neonatal ICU of Rondonópolis – MT.

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