



Multiorganic clinical ultrasound in severe dengue patients

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Clinical image description

Dengue is an infectious disease caused by dengue virus, belonging to the genus flavivirus and transmitted by mosquitoes, mainly *Aedes aegypti*. The disease is in three stages: Feverish, critical and recovery. It is at the critical stage where plasma extravasation occurs that can lead to hypovolemic shock and polyserositis. Criteria for severe dengue should be actively sought and include: hypovolemic shock and / or respiratory distress caused by excess fluid at the pulmonary level; severe bleeding and organ involvement (severe hepatitis, encephalitis or myocarditis) [1].

The introduction of clinical ultrasound as a bedside tool for the emergency physician and the intensivist can be helpful in the diagnosis of severe dengue [2,3].



Figure 1: Shows a small band of subdiaphragmatic peri-hepatic fluid; in 1B image of biliary vesicle with double contour compatible with the presence of perivesicular fluid; in 1C right pleural effusion; 1D splenomegaly with small band of perisplenic fluid.



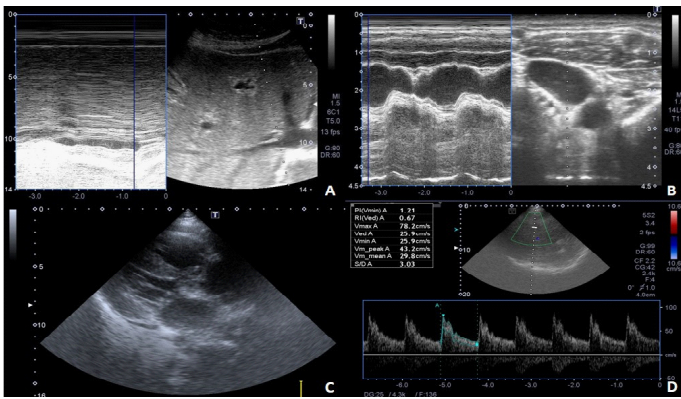


Figure 2: Shows the collapse of the inferior vena cava with respiratory movements; in 2B the same finding in the internal jugular vein; 2C paraesophageal long axis cardiac image of small band of pericardial effusion; 2D middle cerebral artery spectogram compatible with high resistance pattern.

Reference

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