

COPD 2019: High voltage electricity Induced lung injury- A case report and review of literature KSR Institute of Dental Science and Research, India

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Introduction: Electricity Induced lung injury is a rare complication of electrical burn. This is the first documented case of bilateral lung infiltrates/ oedema without cardiac arrest following an electrical burn in Tamilnadu .**Case report:** Mechanics of injury A 25 year old Ranganathan who came in contact with a overhead electrical line while working in terrace was brought in a drowsy state. Examination, Drowsy, occasionally responds to oral commands, SPO₂:88% in room air, Vitals stable, RS: bilateral creps, Sinustachycardia, CPK:340, LDH:412, Echo: Normal Study, Ray: Bilateral fluffy perihelia infiltrates CT; Bilateral Consolidator changes over all lobes. **Management:** Nasal O₂ support, continuous cardiac monitoring, and symptomatic management **Peculiarities:** High Voltage electric injury, No need of mechanical, Ventillation, Disproportionate body involvement, complete recovery. **Conclusion:** Electricity induced lung injury is a rare entity. Only documented such cases are available in literature. Mechanism is still not clearly known. Lung is filled with air which is a poor conductor of electricity. We report a case of bilateral lung infiltrates and hemoptysis after exposure to low-voltage electricity in an agricultural worker. A 58-year-old man standing within the water probe for an electrical irrigation machine and suffered exposure to the 220V circuit for an uncertain duration. Another worker turned off the electricity and therefore the patient remained asymptomatic for the following 10 h until he developed hemoptysis. A chest radiograph showed bilateral infiltrates and chest computerized tomography (CT) revealed ground glass opacities with interstitial thickening. Evaluations, including electrocardiogram, serum troponin, pro-terminal B type N natriuretic peptide (NT-pro BNP), coagulation studies, and echocardiogram, found no abnormality. The patient was treated for suspected electricity-induced lung injury and tranexamic acid bleeding, and rhabdomyolysis with volumetric resuscitation. He recovered with full resolution of the chest x-ray abnormalities by day 7. This is often the primary reported case of bilateral pulmonary edema and / or injury after exposure to electricity without a systole. Electricity-induced lung injury has rarely been reported, but can occur after exposure to high or low voltage. Within the only example of pulmonary edema thanks to electrical injury within the literature, the arrhythmia resulting in systole was considered to be the cause. In other reported cases, the electrical current appears to directly damage the lung tissue, with focal consolidation on radiographs and necrosis and coagulation on

histopathological examination. Electrical injury can cause additional complications like hemoptysis, acute respiratory distress, and infection. We present a case of bilateral pulmonary infiltrates and hemoptysis after exposure to low-voltage electricity. Ten hours later, he coughed around 20 ml of bright red blood, which took him to the hospital. He denied having a fever, chest pain, or shortness of breath. He had no case history of respiratory or upset. Vital signs showed a vital sign of 90 beats / min, a vital sign of 20 breaths / min, a temperature of 37 ° C, a pressure of 120/80 mmHg, and peripheral capillary oxygen saturation (SpO₂) at the space. 95%. Physical examination revealed scattered crackles in both lungs and a full-thickness burn within the palm of his mitt. His chest radiograph showed heterogeneous opacities in both lungs. His chest CT (CT) showed ground glass perihilar opacities of both lungs with predominance of the correct upper lobe, thickening of the interlobular septa and intralobular lines, and diffuse thickening of the bronchial wall. Laboratory results demonstrated elevated serum creatine phosphokinase (CPK) 1338 U / L assays; lactate dehydrogenase (LDH), 466 U / L; creatine kinase-MB (CK-MB), 57 U / L; and aspartate aminotransferase (AST), 64 U / L. Myoglobin in urine performed on day 2 was negative. Serum troponin I and NT-pro BNP levels were 0.011 ng / mL and 0.1 pmol / L, respectively. Platelet count, prothrombin time, and partial thromboplastin time were within the conventional range. No abnormality was found on an electrocardiogram (ECG). Normal cardiac function was observed on an echocardiogram performed at the Day 1 hospital. Sputum culture and acid-bacillus stains were negative. Translations of the Article Frequency los the la the las the el the lo the Definitions of the Article 1 denoting one or more people or things already mentioned or assumed to be general knowledge. If he's saying we're running fifth behind the leader, i do know we do not should make drastic changes. 2 accustomed point forward to a following qualifying or defining clause or phrase. From the primary of July, mothers are going to be eligible for a \$3,000 dollar payment, growing to \$5,000 by 2008. 3 accustomed make a generalized relation to something instead of identifying a specific instance. Consistent with parents, 60 percent of kids complain of feeling tired during the day. 3 more definitions samples of the Nile 29 more examples

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