In-flight Cardiorespiratory Emergencies: Respiratory Care above 30,000 Feet

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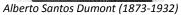






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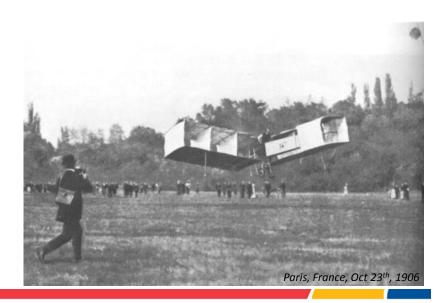


Paris, France, Oct 19th, 1901







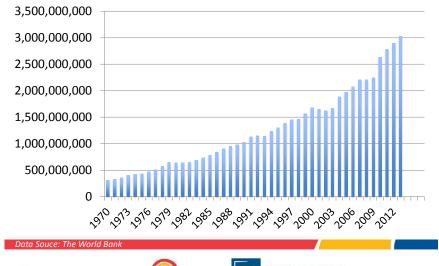








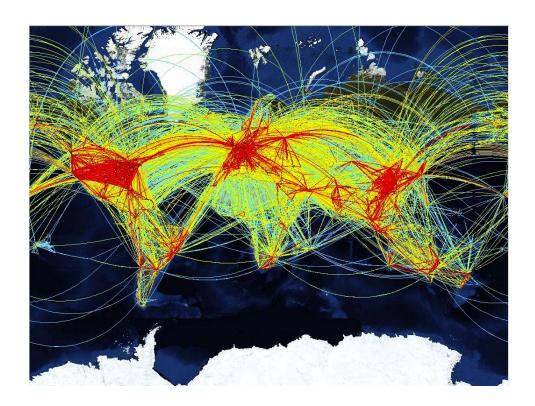
Air Transport (Passengers Carried Worldwide)











Commercial Air Travel



- Bigger planes
- More people
- Longer routes
- More time in the air
- Something is bound to happen







Commercial Air Travel

- Lower air humidity
- Dehydration
- Changes in cabin pressure
- Hypoxia, hypoxemia
- Hyperventilation
- Altitude sickness

- Confined environment
- Crowded conditions
- Decreased mobility
- White noise
- Dimmed lights
- Limited resources
- Delayed access to definitive care







At Cruising Altitude



- Cruising altitude
 - 32,000 to 43,000 ft
- Cabin altitude
 - 6,000 to 8,000 ft
- PAO₂ at sea level
 - ~100 mmHg
- PAO₂ at cruising altitude
 - 72 to 64 mmHg







0749-5161/02/1802-0078 PEDIATRIC EMERGENCY CARE Copyright © 2002 by Lippincott Williams & Wilkins, Inc.

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Commercial airline travel decreases oxygen saturation in children

ANDY P. LEE, MD, LOREN G. YAMAMOTO, MD, MPH, MBA, NATALIE L. RELLES, MD

BMJ 1998;316:887-94

Effect of exposure to 15% oxygen on breathing patterns and oxygen saturation in infants: interventional study

K J Parkins, C F Poets, L M O'Brien, V A Stebbens, D P Southall







In-Flight Respiratory Issues

- Bronchospasm (asthma)
- COPD
- Croup
- Cough
- Pneumonia
- Aspiration
- Anaphylaxis

- Sinus decompression
- Respiratory distress
- Pulmonary embolism
- Hypoxemia
- Pulmonary hypertension
- Pneumothorax
- Respiratory arrest







The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Outcomes of Medical Emergencies on Commercial Airline Flights

Drew C. Peterson, M.D., Christian Martin-Gill, M.D., M.P.H., Francis X. Guyette, M.D., M.P.H., Adam Z. Tobias, M.D., M.P.H., Catherine E. McCarthy, B.S., Scott T. Harrington, M.D., Theodore R. Delbridge, M.D., M.P.H., and Donald M. Yealy, M.D.

> N Engl J Med 2013;368:2075-83. DOI: 10.1056/NEJMoa1212052

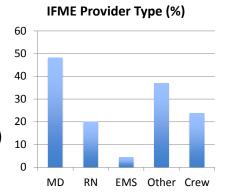






IFME Characteristics

- 11,920 IFME
- 16 IFME / 1 million pax
- 1 IFME / 604 flights
- Mean age 48 ± 21 yrs
- Age range (14d to 100 yrs)
- Aircraft Diversion: 7.3%



N Engl J Med 2013;368:2075-83







Category	All Emergencies	Aircraft Diversion	Transport to a Hospital*	Hospital Admission†	Death
		no./toto	al no. (%)		no.
All categories	11,920/11,920 (100)	875/11,920 (7.3)	2804/10,877 (25.8)	901/10,482 (8.6)	36
Syncope or presyncope	4463/11,920 (37.4)	221/4463 (5.0)	938/4252 (22.1)	267/4123 (6.5)	4
Respiratory symptoms	1447/11,920 (12.1)	81/1447 (5.6)	311/1371 (22.7)	141/1336 (10.6)	1
Nausea or vomiting	1137/11,920 (9.5)	56/1137 (4.9)	243/1025 (23.7)	61/994 (6.1)	0
Cardiac symptoms	920/11,920 (7.7)	169/920 (18.4)	370/813 (45.5)	162/770 (21.0)	0
Seizures	689/11,920 (5.8)	83/689 (12.0)	224/626 (35.8)	75/602 (12.5)	0
Abdominal pain	488/11,920 (4.1)	50/488 (10.2)	164/412 (39.8)	41/391 (10.5)	0
Infectious disease	330/11,920 (2.8)	6/330 (1.8)	45/239 (18.8)	8/232 (3.4)	0
Agitation or psychiatric symptoms	287/11,920 (2.4)	16/287 (5.6)	38/249 (15.3)	17/244 (7.0)	0
Allergic reaction	265/11,920 (2.2)	12/265 (4.5)	40/233 (17.2)	8/229 (3.5)	0
Possible stroke	238/11,920 (2.0)	39/238 (16.4)	92/214 (43.0)	46/196 (23.5)	0
Trauma, not otherwise specified	216/11,920 (1.8)	14/216 (6.5)	34/185 (18.4)	5/180 (2.8)	0
Diabetic complication	193/11,920 (1.6)	15/193 (7.8)	45/181 (24.9)	13/172 (7.6)	0
Headache	123/11,920 (1.0)	10/123 (8.1)	23/108 (21.3)	4/107 (3.7)	0
Arm or leg pain or injury	114/11,920 (1.0)	6/114 (5.3)	27/100 (27.0)	4/98 (4.1)	0
Obstetrical or gynecologic symptoms	61/11,920 (0.5)	11/61 (18.0)	29/53 (54.7)	11/47 (23.4)	0
Ear pain	49/11,920 (0.4)	1/49 (2.0)	2/43 (4.7)	1/43 (2.3)	0
Cardiac arrest	38/11,920 (0.3)	22/38 (57.9)	14/34 (41.2)	1/6 (16.7)	31
Laceration	33/11,920 (0.3)	1/33 (3.0)	3/26 (11.5)	0/25	0
Other	821/11,920 (6.9)	62/821 (7.6)	162/705 (23.0)	36/679 (5.3)	0
Unknown	8/11,920 (0.1)	0/8	0/8	0/8	0

Contents of Emergency Medical Kits

Airways, oropharyngeal Analgesic, non-narcotic

Adhesive tape, 1-inch
Alcohol sponges
Antihistamine, 50 mg, injectable
Antihistamine tablets, 25 mg
CPR mask
Aspirin tablets, 325 mg
IV administration set
Atropine, 0.5 mg, 5 cc

Needles Bronchodilator, inhaled
Protective gloves Dextrose, 50% / 50 cc, injectable

Sphygmomanometer Epinephrine 1:1000, 1 cc, injectable Stethoscope Epinephrine 1:10,000, 2 ml, injectable Syringes Lidocaine, 5 ml, 20 mg/ml, injectable

Tape scissors Nitroglycerine tablets
Tourniquet Saline solution, 500 cc

Manual resuscitation device with 3 masks Basic instructions on use of the kit

Enhanced Medical Kit

Burn dressings Calcium chloride Morphine
Cord clamps Diazepam Nalbuphine
Disposable scalpel Digoxin Naloxone
Endotracheal tubes Glucose gel Promethazine

Emergency tracheal catheter Furosemide Sodium bicarbonate

Glucometer Lorazepam
Laryngoscope blade Haloperidol
Steri-strips Hydrocortisone
Thermometer Meclizine

Tourniquet Methylprednisolone

Urinary catheter Metoprolol

Lightening Rod Effect

- 1. The febrile, irritable, mottled infant
- 2. The child dancer with leg pain
- The intoxicated anesthesiologist
- 4. The suicidal Englishman

- 4. The ectopic vs ruptured ovarian cyst
- 5. The diaphoretic overweight man with chest pain
- 6. The bald, unconscious man with a midline scar
- 7. The apneic lady









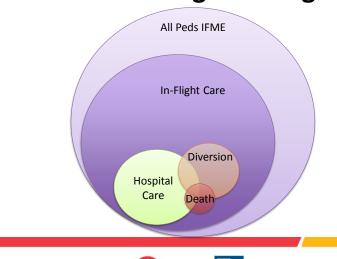






Pediatric In-Flight Emergencies

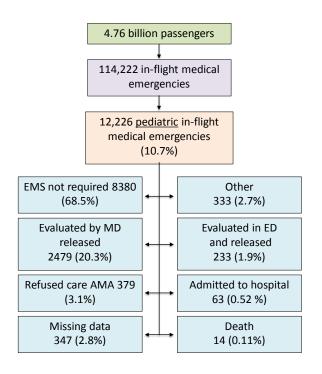












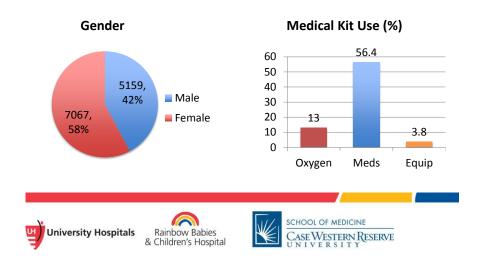
Diagnostic Category	N (%)
Gastrointestinal	4311 (35.3%)
Infection/fever	2469 (20.2%)
Neurologic	1486 (12.2%)
Allergic	1052 (8.6%)
Respiratory	770 (6.3%)
ENT	598 (4.9%)
Trauma	241 (2%)
Dermatologic	216 (1.8%)
Psychiatric	189 (1.5%)
Burns	156 (1.3%)
Orthopedic/musculoskeletal	135 (1.1%)
Cardiac	104 (0.8%)
Dental	71 (0.6%)
Endocrine	52 (0.4%)
Other	376 (3.1%)

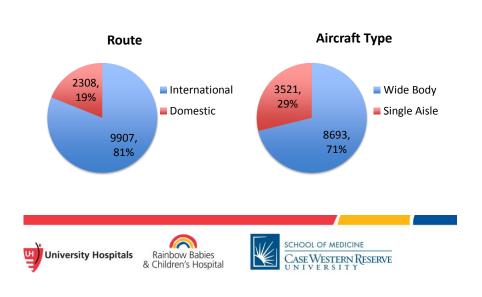




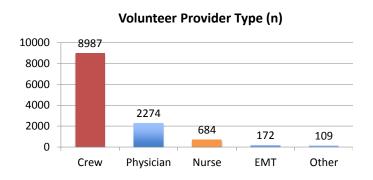


Pediatric In-Flight Emergencies





Pediatric In-Flight Emergencies







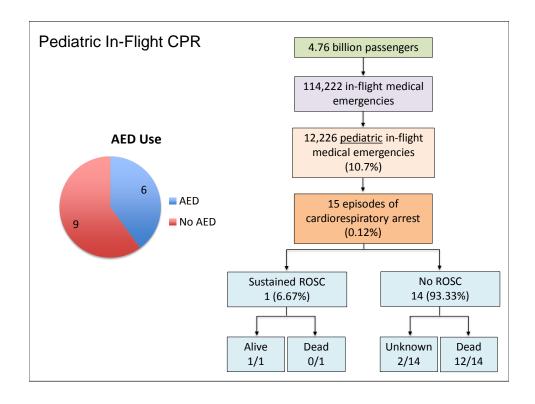


Need for Aircraft Diversion (n=115, 0.94%)	Odds Ratio (95% CI)
Emergencies Involving Infants	3.65 (2.25-5.93)
Assisted by Physician Volunteer	8.47 (5.21-13.75)
Total Flight Duration	0.997 (0.995-0.998)
Flight Time Remaining	1.004 (1.003-1.005)

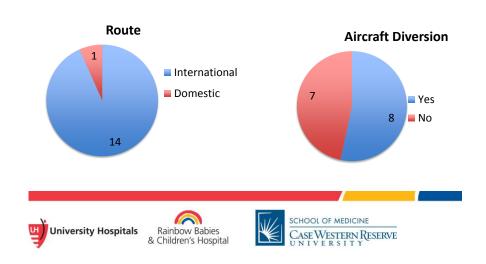




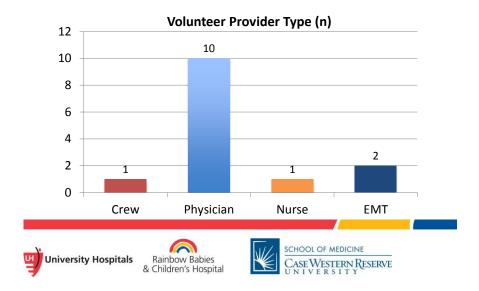


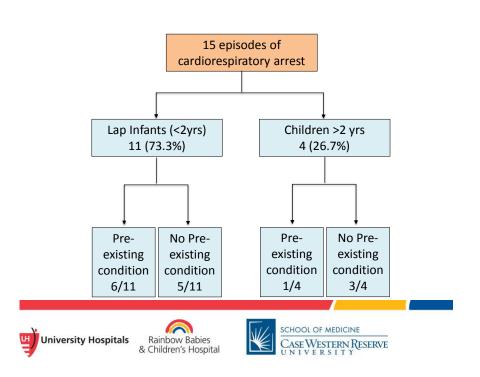


Pediatric In-Flight CPR



Pediatric In-Flight CPR







Fatalities Above 30,000 Feet: Characterizing Pediatric Deaths on Commercial Airline Flights Worldwide*

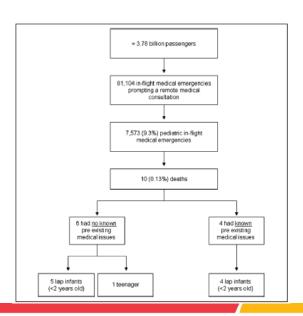
Alexandre T. Rotta, MD, FCCM^{1,2}; Paulo M. Alves, MD, MSc³; Katherine E. Mason, MD^{1,2}; Neil Nerwich, MD⁴; Richard H. Speicher, MD^{1,2}; Veerasathpurush Allareddy, BDS, MBA, PhD, MMSc⁵; Veerajalandhar Allareddy, MD, MBA^{1,2}

Pediatr Critical Care Med 2014; 15:e360-e363





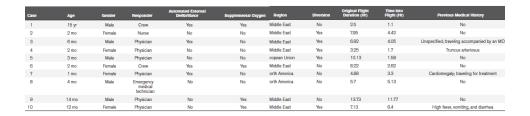


















My 2 Cents

- Stay hydrated
- No "diuretics"
 - ETOH
 - Coffee
- Caution if pre-existing
 - Anemia
 - Cardio-pulmonary disease
 - Pulmonary hypertension

- Carry-on your medications
- Medical alert bracelet
- Got oxygen?
- Consider the no "lap infant" rule
- No children on aisle seat
- Properly restrain your children















Questions?

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