

## Proceedings and Abstracts



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ABSTRACT BOOK - CFPSL 14th Annual Academic Sessions 2016

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# A death due to Dengue Fever with a potential for allegation of medical mis-management

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#### Introduction

Despite the improvement in investigation techniques and updated management protocols, dengue continues to bea killer in Sri Lanka. The reason for this is due to late presentations to hospital, prescribing NSAID by GPs, misdiagnosis, poor monitoring and mismanagement in ward setup.

#### Case Report

A previously-healthy year old boy presented with a history of high fever and respiratory upper infection for last 3 days. He passed away 48 hours after been admitted hospital.No external orinternal features of bleeding manifestations were evident. Massive cerebral oedema with 1.7kg of brain weight, 600 ml of Straw coloured fluids in plural cavity, 800ml of the



same type of fluid in peritoneal cavity and flame shaped haemorrhages in endocardium were evident. Ancillary reports were negative for H<sub>1</sub>N<sub>1</sub>, Leptospirosis and Dengue. Histology of all organs was unremarkable. CSF-PCR was positive for Dengue.

#### Conclusion

Cause of death was given as Dengue Shock Syndrome. Dengue antigen test which is available in MRI can be done on day one in order toassist efficacious management.