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Hydration of the septic patient

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There are much we do not know about hydration of the septic patient.

- 1) How much volume is needed ?
- 2) When to administer ?
- 3) Which types of fluids ?

Fluid resuscitation is a every day intervention in acute medicine. The selection and use of resuscitation fluids is based on physiological principles, but clinical practice is determined largely by clinician preference, with marked regional variation. No ideal resuscitation fluid exists. There is emerging evidence that the type and dose of resuscitation fluid may affect patient-centered outcomes.

What do we know about types ?

- 1) Synthetic colloids are harmful
- 2) Human albumen is fairly safe
- 3) We do not want to give unnecessary blood products
- 4) Be careful with saline

All resuscitation fluids can contribute to the formation of interstitial edema, particularly under inflammatory conditions in which resuscitation fluids are used excessively. Critical care physicians should consider the use of resuscitation fluids as they would the use of any other intravenous drug. The selection of the specific fluid should be based on indications, contraindications, and potential toxic effects in order to maximize efficacy and minimize toxicity.

I will go through the physiological principles of volume resuscitation based on the Frank and Starling theories and look into the hemodynamic variable used to predict fluid responsiveness.