

Dengue Encephalitis Nursing Approach and Nursing Careplan

Amandeep Kaur¹, Kishalay Datta²

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Abstract

Dengue fever is the most common viral fever caused by the bite of *Aedes aegypti* female mosquito. Dengue fever is prevalent in the south east asian country especially in low and middle income countries. Poor sanitary conditions contribute to the major factor for spread of this disease. Dengue encephalitis is a rare entity where the patient's central nervous system gets infected by the viral particle, and has varied outcomes from recovery to death of the patient.

In this case report, we will be seeing the nursing care plan and role of good nursing efficacy in the treatment of dengue encephalitis patient.

Keywords: Dengue encephalitis; Dengue shock syndrome; Mechanical ventilator; Dengue fever.

INTRODUCTION

Encephalitis is a very common neurological complication of dengue fever. Dengue virus is a single stranded RNA virus of the Flaviviridae family causing dengue fever and its related complications. Dengue encephalopathy is usually secondary to multisystem derangement like shock, hepatitis, coagulopathy, and secondary bacterial infection.¹

Nursing care plan for dengue encephalitis and dengue fever perseveres from continuous vitals monitoring, close monitoring of patient coagulation profile, effective infection control, controlled medications, family members and patient counseling and teaching, ventilator management.

CASE

A 23 year old male patient was admitted to the Emergency room with diagnosis of dengue fever (NS1 positive). Patient had history of bleeding from gums and nose 1 day back. Today, he had altered sensorium. He was newly married for last 10-15 days. In the emergency room he was examined by the doctors team and treatment was started according to the guidelines.

The nursing care plan involved in this patient was taking care of the bleeding diathesis, counselling the newly married bride about the patient condition

Author's Affiliations: ¹Senior Staff Nurse, ²Director and HOD, Department of Emergency Medicine Max Hospital, Shalimar Bagh, New Delhi 110088, India.

Corresponding Author: Kishalay Datta, Director and HOD, Department of Emergency Medicine Max Hospital, Shalimar Bagh, New Delhi 110088, India.

E-mail: dr.kishalay@gmail.com

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and providing mental support, following doctors orders for the patient well being.

The patient suddenly had seizure attack in the ER and was stabilised by local seizure control guidelines. Patient GCS remained compromised for long time (timely checked and recorded in the nurses vitals record form) and the doctors were informed about the unstable condition and poor GCS of the patient. He was then incubated and put on ventilatory support. It was difficult to counsel the newly wed bride but, in the nursing education, we are taught for the same.

The patient condition gradually improved over the few days and extubated on the fifth day and was discharged on the 8th day of admission.

DISCUSSION

The nursing care plan involved the following functions from day 1 till day of discharge.

1. **Proper vitals, report and medication records:** As a major role in the treatment of patients, maintaining of the vital records, daily reporting of blood samples, medication administered records are role important for the healthy outcome for patient illness. This includes timely informing the concerned doctor and the treating physician regarding any deterioration in the patient condition, any drug overdose or allergy, any record abnormal and deviated from normal parameters which must be looked and act upon.
2. **Infection control:** Infection control is a major factor in the hands of the health care providers. Nurses per se play one of the most important factor in prevention (and transmission) of infections in the health care setup. Hand washing, hand sanitising, wearing of disposable gloves and masks and head caps are all measures to prevent transmission of infections.
3. **Ventilator management:** Though neglected many a times, ventilator management is

the role of both doctors and nurses. All the nursing team should be trained in basic interpretations and handling of ventilators. Taking care of ventilated patients is a big task faced by nurses. This includes ventilator alarm management and interpretation, care of Endotracheal tube, oral care, eye care, patient positioning.

Post extubation care also impacts the outcome (positive) in ventilatory patients as care must be given to the airway (clearing of airway, chest physiotherapy, medications and oral hygiene).

4. **Family counselling and education:** Often dismissed and overlooked by health care professionals, it's the job of both doctors and nurses to explain and impart knowledge regarding the patient health status to the family members. This factor in nursing care plan is often missed by young and also the experienced nursing team.

Medications help patient health recover but the care given by the nurse helps the patient's soul to recover. The tender love and care given by the nurse to the patient the speedy recovery of patients which supports the medical management.

CONCLUSION

To conclude, the nursing care plan varies from person to person, importance is given in this case to ventilatory management in dengue encephalitis. There are many medical articles and case reports for the management of dengue encephalitis but there are very few articles and case reports supporting nursing care plans and importance must be given to improve the education standards and encouragement must be given at the basic level for such publications.

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