

# Dilated cardiomyopathy (pediatrics)

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Patients with **dilated cardiomyopathy** may be in shock condition.

- **Myocarditis** is one of the most common causes of dilated cardiomyopathy in previously healthy children.

**Clinical manifestations** of myocarditis are multifaceted.

- May be in the foreground
  - myocardial dysfunction,
  - dysrhythmia
  - or may be clinically "silent" cases.

The most common symptoms are

- tachycardia and
- tachypnoea,

The most common life-threatening dysrhythmias are

- supraventricular and
- ventricular tachycardia.

Rarely can we encounter rhythm disorders - AV blocks,

- which lead to bradycardia and hypotension and are also extremely serious.

**Approach to a patient** with myocarditis or other forms of dilated cardiomyopathy is the same as for patients in cardiogenic shock, but the response to traditional inotropic therapy may not be sufficient. In addition, infusion of catecholamines in these cases can lead to the development of severe dysrhythmias.

- Recommended for diagnosed myocarditis
  - corticoid therapy or better HDIVIG at a total dose of 2 g / kg (1 g / kg / day for 2 days).
    - These medicines may modulate the inflammatory response.
- Rescue therapy is ECMO.

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## Links

## Source

- HAVRÁNEK, Jiří: *Shock* . (managed)

## Related Articles

- Shock (pediatrics)
- Shock
- Cardiogenic shock
- Cardiomyopathy
- Dilated cardiomyopathy