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Refractory status epilepticus – a major problem for the practitioners

***[1,5]Cornelia Calcii, [1,5]Svetlana Hadjiu, [2,5]Mariana Sprincean, [1,6]Ludmila Feghiu, [1]Nadejda Lupusor, [1,5]Ninel Revenco, [3,4,6]Stanislav Groppa**

[1]Department of Pediatrics, [2]Department of Molecular Biology and Human Genetics, [3]Department of Neurology No 2
[4]Laboratory of Neurobiology and Medical Genetics
Nicolae Testemitanu State University of Medicine and Pharmacy, Chisinau, the Republic of Moldova
[5]Institute of Mother and Child, Chisinau, the Republic of Moldova
[6]The National Center of Epileptology, Chisinau, the Republic of Moldova

Authors' ORCID iDs, academic degrees and contributions are available at the end of the article

*Corresponding author: cornelia.calcii@usmf.md
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Abstract

Introduction: Status epilepticus (SE) is a life-threatening neurological emergency requiring immediate medical intervention and is associated with high mortality and morbidity. The aim of this research was evaluation of clinical and etiological profile of refractory status epilepticus (RSE) among children aged between 1 month and 18 years.
Material and methods: The study was done between January 1, 2017 and December 24, 2019. All children with the age limits mentioned above, who presented convulsive SE, subsequently with development in refractory status epileptic (RSE), were included in the study. Patients were investigated and evaluated according to a standard protocol. Subsequently, the characteristics of children with RSE and those without an evolution in RSE were compared.
Results: 55 children, out of whom 32 boys with SE were enrolled in the study, of which 20 children (36%) developed RSE. Central nervous system (CNS) infections were the most common causes of SE and development of RSE (51% in SE and 53% in RSE, $p > 0.05$). Noncompliance of antiepileptic medication served as the second cause for evolution of RSE. The overall mortality rate was 10.9%, the chances of death in RSE (20%) being higher than in SE (5.7%). The unfavorable prognosis was seven times higher in children with RSE, compared to children who developed SE.
Conclusions: In the management of CNS infections, pediatricians should be aware of the high risk of developing RSE. In addition, the possibility of developing RSE should be considered and promptly managed in an intensive care unit in order to reduce the risk of mortality and morbidity of this severe neurological condition.
Key words: refractory status epilepticus, childhood epilepsy, CNS infection.

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