



Ablación del ganglio estrellado en paciente con tormenta arrítmica. Caso clínico [

2023

text (article)

Analítica

Arrhythmic storms are defined as the existence of at least three episodes of sustained ventricular arrhythmia within a 24-hour period. This clinical presentation form of these arrhythmias is associated with increased patient mortality. For the formation of these storms, apart from the necessary arrhythmic substrate, the sympathetic system plays a very important role in their development. The treatment of recurrent ventricular tachycardias includes a variety of antiarrhythmic drugs, sympathetic blockade with beta-blockers, general anesthesia, different methods of circulatory support systems, overstimulation in patients with an implantable cardioverter defibrillator, and even urgent catheter ablation in specific cases. Percutaneous stellate ganglion block with local anesthetics is effective in the acute setting, however, its effect is temporary. We present the clinical case of a 62-year-old man admitted to a Cardiac Critical Care Unit with great hemodynamic instability who underwent stellate ganglion ablation as an effective treatment for the arrhythmic storm they presented. Given the severity of the case, it was deemed appropriate to establish a care plan based on Carpenito's bifocal model to solve the real and potential health needs of a patient diagnosed with Austrian Syndrome. This was based on the North American Nursing Diagnosis Association taxonomy, as well as on the Nursing Outcomes Classification and Nursing Interventions Classification to define objectives and nursing interventions, respectively

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Editorial: 2023

Tipo Audiovisual: nursing care critical care critical care nursing nursing diagnosis Interdisciplinary communication stellate ganglion arritmia cardiaca taquicardia ventricular ganglio estrellado cuidados de enfermería cuidados críticos enfermería de cuidados críticos diagnóstico de enfermería comunicación interdisciplinaria arrhythmias cardiac tachycardia ventricular

Documento fuente: Enfermería en cardiología: revista científica e informativa de la Asociación Española de Enfermería en Cardiología, ISSN 1575-4146, N°. 88-89, 2023, pags. 74-79

Nota general: application/pdf

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Lengua: Spanish

Enlace a fuente de información: Enfermería en cardiología: revista científica e informativa de la Asociación Española de Enfermería en Cardiología, ISSN 1575-4146, N°. 88-89, 2023, pags. 74-79

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