

Intrapulmonary arteriovenous shunt in children with chronic liver disease: Clinical features, laboratory data and outcome

Mahmoodi, E., Kianifar, H.R., Partovi, S., Mafinejad, S., Bozorgnia, A.

Department of Pediatrics, Ghaem Medical Center, Mashhad University of Medical Sciences, Mashhad, 91766991999, Iran

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Abstract

Objective: To determine the frequency of hepatopulmonary syndrome in children with chronic liver disease, and its clinical and biochemical associations. **Method:** This study included 27 children with chronic liver disease, who underwent contrast echocardiography with agitated saline and measurement of arterial blood gases. **Results:** Of the 27 patients studied, 14 had intrapulmonary shunting of blood. This shunting was associated with presence of palpable spleen, cyanosis and dyspnea, but not with abnormalities in the biochemical tests of liver function. At 1-year follow-up, there were 2 deaths among 14 patients with intrapulmonary shunt. In a logistic regression model, $\text{PaO}_2 < 70$ mmHg was found to be a predictor of death ($p < 0.05$). **Conclusion:** Intrapulmonary shunting is a common and important complication in children with chronic liver disease. Copyright © 2008 by Indian Society of Gastroenterology.

Reaxys Database Information

Indexed Keywords

EMTREE drug terms: sodium chloride

EMTREE medical terms: adolescent; arterial gas; article; biochemistry; child; chronic liver disease; clinical feature; contrast echocardiography; cyanosis; death; dyspnea; female; follow up; hepatopulmonary syndrome; human; laboratory; liver function; logistic regression analysis; major clinical study; male; outcome assessment; pulmonary shunt; spleen

MeSH: Adolescent; Child; Child, Preschool; Chronic Disease; Female; Hepatopulmonary Syndrome; Humans; Infant; Liver Diseases; Male

Medline is the source for the MeSH terms of this document.

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