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Progressrepor tof clinical works of Georgian Critical Care MedicineInstitutein 2014 years

(Tbilisi, Georgia)

## "Critical Care & Catastrophe Medicine", Tbilisi, Georgia, 2015, N15

Georgian Critical Care Medicine Institute clinic in 2014 years treated by 555 patients. As a result, the number of 3747.bed-daey. among 120 patients died. Most of the patients were in critical condition with acute respiratory failure- 217 cases, of cerebral blood circulation disorder -131 cases, acute heart failure 32 cases, endotoksiuri shock 12 cases, septic shock 10 cases, polytrauma 5 cases, alcohol intoxication 3 cases and other - 6 cases, The mortality rate are presented in the following way: 33% of acute respiratory failure, acute haert failure- and 9.5% and at the t stroke by 20% patients. The 116 patients underwent surgery profile among them of general surgery profile was 41 cases, of Urology-26 cases and of neurosurgery. - 22 cases. All patients underwent artificial ventilation, At the same time every patient received standard treatment, which included water and electrolyte metabolism correction, regulation of acid-base balance, enteral and parenteral nutricion ,antibascterial terapy, sedations, haery failure reparative therapy and other treatments, As an alternative form of treatment there is also mentioned (indicated) about remote control system, progenitor precursors cells and using plasmapheresis. There is also information about treatment costs and mortality indicator.

**Key words**: Critical patient, clinic, report.

Georgian Critical Care Medicine Institute clinic in 2014 years treated by 555 patients. As a result, the number of 3747.bed-daey. The patients ranged in age as follows: up to 50 years were -67, 50-60 years-85, 60-80 years - 250, and above the 80-year-old - 97 persons.. The distribution of patients by months and days in bed, he presented as follows: January - 47 patients and 264 bed / day, February 43 patients and 285 bed / day, October 45 patients and 298 bed / day, April 50 patients and 256 bed / day, May 48 patients and 417-bed / day, .June patients and 373 bed / day, July 42 patients and 234 s / d, August 48 -291 patient's. September 54 -452 patient's bed / day,October 47 patients and 292 bed / day,November parients ans bed/day, December patients and bed /day. The majority (92,7%) patients were transferred to other hospitals and a small number of patients (7.3%) on the road. Most of the patients were in critical condition with acute respiratory failure- 217 cases, of cerebral blood circulation disorder -131 cases, acute heart failure 32 cases, endotoksiuri shock 12 cases, septic shock 10 cases, polytrauma 5 cases, alcohol intoxication 3 cases and other - 6 cases. All patients had underlying conditions with chronic heart failure, hypertension, diabetes and others. The mortality rate was 21.9%. In 2013, the mortality rate of 29.5% .and this is a decrease of 7.6% compared with the previous year, in 2014 the mortality rate are presented in the following way: 33% of acute respiratory failure, acute haert failure- and 9.5% and at the t stroke by 20% patients. The 116 patients underwent surgery profile among them of general surgery profile was 41 cases, of Urology-26 cases and of neurosurgery.- 22 cases.

In 2014, the of Critical Care Medicine Institute one bed / day cost 800 Larus, which at that time corresponded to about 500 US D. This included the standard; laboratory reaserch wich blood count, blood group and Rh, urine analysis, biochemical analysis, acid-base balance and electrolytes, C-reactive protein, prokaltsitonini, lipid metabolism, hemokoagulology, immunology, bacteriology, virology and other studies. Also this cost included instrumental studies witg chest X-ray, ultrasound of the abdomen and pleural cavity, the brain blood vessels Transcranial dopleroskopia, echocardioscopy, ECG, computed tomography, nuclear-magnetic resonance, gastroscopy, Irigoskopii and others stydies. The bed/day cost was prise of blood and blood products, as well as a small surgery amount of tracheostomy, plasmapheresis, pleural or abdominal puncture and drainage and others, that was made by the critical medicine doctor All the patient was artificial breasing. Tracheostomy was made to all of the patients on

the 6-th and 7-th day of the artificial ventilation. This was held among the most of the patients by stationery machine "Puritan benet" company (US), on the SIMV regime, with the moderate hyperventilation and on the breathe out creating positive size of pressure (+5 cm. water pillar). The volume of breathing air was 8 l/min, and the oxygen percentage in breathe-in air was 50%. Simultaneously, every patient was treated according to the standard treatment, which included water and electrolyte metabolism correction, regulation of acid-base balance, enteral and parenteral nutricion ,antibascterial terapy, sedations, haert failure reparative therapy and other treatments, All patients was with remote control system, Also the treatment process included progenitor precursor commiting therapy, plasmapheresis, miusic therapy and other types of vehicles using the full liquidation of the critical condition.

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ზ.ხელაძე,ზვ.ხელაძე,ნ.ქაჯაია,მ.გუტაშვილი,დ.კალანდია,მჯ.იაკობიძე, ხ.სიხარულიძე,თ.ბაღაღოშვილი,ხ.შინჯიკაშვილი.თ.მაზმიშვილი, ჯ.პატარიძე.

საქართველოს კრიტიკული მედიცინის ინსტიტუტის 2014 წლის კლინიკური მუშაობის ანგარიში

ეს არის საქართველოს კრიტიკული მედიცინის ინსტიტუტის 2014 წლის კლინიკური მუშაობის ანგარიში, რომელიც მოიცავს 555 კრიტიკული პაციებტის მკურნალობას. სტანდარტულ მკურნალობასთან ერთად ავადმყოფებს უტარდებოდათ პროგენიტული პრეკურსორების კომიტირება, პლაზმაფერეზი,მუსიკით თერაპია და სხვა.მკურნალობის პროცესის სამართავად გამოყენებული იყო დისტანციური მართვის სისტემა,ლეტალობამ შეადგინა 21,9%.