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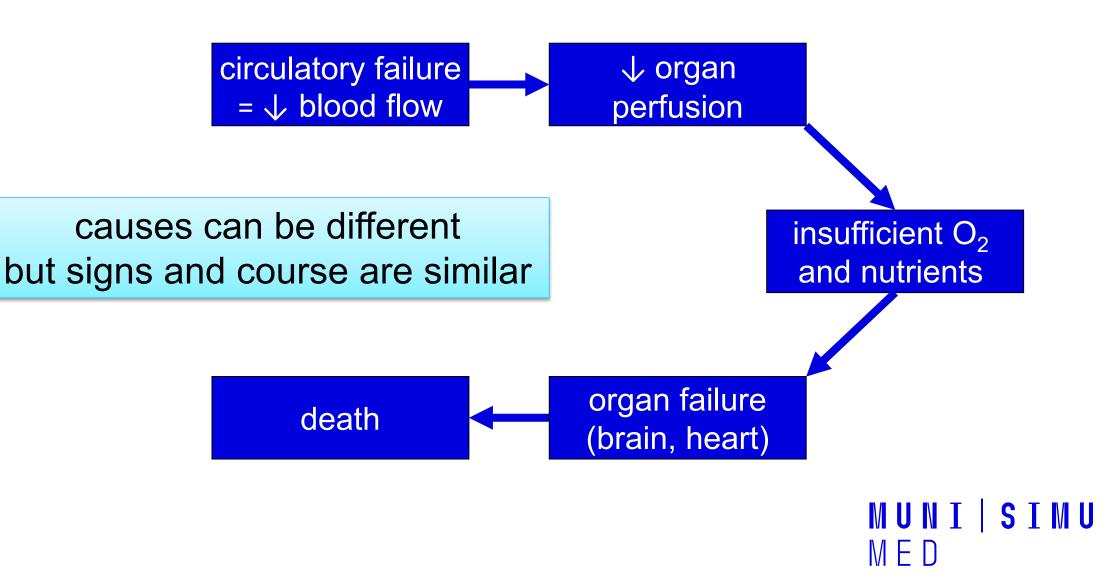
## Shock

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## **Learning points**

Student will learn how to recognize signs and symptoms of shock. Student gains knowledge of different causes of shock. Student will learn about first aid to victims in shock.

### What is shock?



### **Shock causes**

#### - loss of circulating fluid (hypovolemic shock)

- blood (haemorrhagic shock) external or internal bleeding
- loss of fluids (heat stroke, diarrhoea, burns)

#### - relative increase in blood vessels volume (distributive shock)

- severe allergic reaction (anaphylactic shock)
- severe infection (septic shock)
- injury to the spinal cord or brain (neurogenic shock)

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## Shock causes II.

- heart (as a pump) failure (cardiogenic shock)
  - acute myocardial infarction
  - heart rhythm disturbances
  - decompensation of chronic heart failure

#### - obstacle to the blood flow (obstructive shock)

- pulmonary embolism
- tension pneumothorax
- cardiac tamponade

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### **Compensatory mechanisms**

the aim is to provide sufficient blood flow (and O<sub>2</sub>) to the vital organs

– **lungs:** increase in respiratory rate (raise amount of  $O_2$  in blood)

- heart: increase in heart rate (pump more blood)
- blood vessels: preferred blood supply for vital organs at the expense of the others (muscles, skin, gut)

limited in the elderly or severely ill

## **Shock signs**

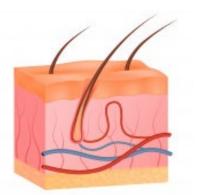


- weak or absent pulse at the wrist



- 个 respiratory rate
- shallow breathing

- pale, cold skin
- sweating
- grey-blue skin
- prolonged capillary refill time



- weakness, dizziness
- thirst
- restlessness, confusion
- drowsiness, unconsciousness
- nausea, vomiting





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## **Shock phases**

#### I. compensated shock

- compensatory mechanisms provide vital organs blood supply
- rapid, strong pulse at the wrist
- pale and cold skin, sweating

#### I. decompensated shock

- exhausted compensatory mechanisms, decreased vital organ blood supply
- rapid and weak pulse at the wrist
- rapid and shallow breathing
- grey-blue skin, prolonged capillary refill time
- weakness, dizziness, thirst, restlessness
- nausea and vomiting

## Shock phases II.

#### III. terminal shock

– irreversible changes of vital organs, vital functions failure

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- very rapid, weak or absent pulse at the wrist
- grey-blue skin, no capillary refill
- drowsiness to unconsciousness
- shallow breathing, gasping (agonal breathing)

#### ... death

### **First aid**

- treat any possible cause of shock
  - very limited options
  - injuries:
    - control external bleeding
    - stabilize fractures (decrease internal bleeding)
  - anaphylaxis separate lecture

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## **Avoid complications**



30-50cm

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- keep the victim warm and dry (blankets, space blanket)
- do not allow eating or drinking (despite felling thirsty)
- do no give any medications
- treat pain stabilize fractures
- lay down and raise victims legs
  - transfer of blood from legs to the vital organs

## Monitoring

- talk to the victim, keep him/her calm
- take pulse at the wrist (frequency, strength)
- breathing
- skin colour and temperature, capillary refill
- in case of consciousness open the airways
- start CPR if needed

| repeated   continuous<br>do not leave the victim |
|--|
| do not leave                                     |
| U.C.   |

call emergency – secure fast transfer avoid rapid position change

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## Shock with dominant shortness of breath

- common signs and symptoms:
  - fast or irregular beatings of the heart
  - coughing up pink frothy sputum (contains blood)
  - leg swelling
  - usually the elderly
  - no history of injury or fluid loss
- (common) cause is cardiogenic or obstructive shock
  - leg raising is not appropriate sufficient filling of blood vessels, worsens breathing
  - the victim commonly finds a convenient position
  - usually sitting position

### Take home message

Shock is not only a fright.

Rescuer safety is always first.

Dominant signs of shock are related to the circulatory failure – paleness and sweaty skin are common even before an exam. First aid options are limited – secure fast transport.

### **Learning outcomes**

– Student is able to briefly describe the course of shock.

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– Student recognizes the symptoms of shock.

– Student knows the causes of shock.



- First Aid Manual, Krohner JR (ed.), 2nd edition, DK Publishing, 2004, pp 120-121.

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