Guillain Barre Syndrome in Children

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Abstract: Guillain-Barre syndrome (GBS) is the most common form of acute polyradiculoneuritis (PRNA). It is a medical emergency in pediatrics that requires rapid diagnosis and immediate assessment of the severity criteria for the implementation of appropriate treatment. Retrospective, descriptive study in 24 patients under the age of 18 who presented with GBS between September 2017 and July 2021 and were hospitalized in the multipurpose pediatric intensive care unit of the Abderrahim EL Harouchi children's hospital in Casablanca. The average age was 7.91 years, with extremes ranging from 18 months and 14 years and a male predominance of 75%. After a prodromal event, most often infectious (80%) and a free interval of 12 days on average, 2 types of motor disorders begin either hypo or arereflectic flaccid paralysis of the lower limbs (45.8%) or flaccid quadriplegia hypo or arereflectic (54.2%). During GBS, the most formidable complication is respiratory distress, which can occur at any time. In our study, respiratory impairment was observed in 70.8% of cases. In addition, other signs of severity, such as swallowing disorders (75%) and dysautonomic disorders (8.33%), were also observed, which justified care in the intensive care unit for all of our patients. The use of invasive ventilation was necessary in 76.5% of cases, and specific treatments based on immunoglobulins were administered in all our patients. Despite everything, the death rate remains high (25%) and is mainly due to complications related to hospitalization. Guillain Barré syndrome is, therefore, a pediatric emergency that requires rapid diagnosis and immediate assessment of severity criteria for the implementation of appropriate treatment.

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