

Seizures in the Hypebaric Chamber

DECEMBER 2021

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Oxygen Toxicity Seizures



Initially described by Paul Bert in the late 19th century, exposure to high levels of oxygen can lead to acute oxygen toxicity. The manifestations of which are neurologic in nature. The early signs are nonspecific such as twitching of the lip, changes in vision, tinnitus, or a sudden change in behavior. Left untreated the toxicity will progress to seizures.

Oxygen toxicity seizures are uncommon, occurring only 0.52 times per 10,000 hyperbaric treatments. Air breaks reduce the potential for acute oxygen toxicity. If a patient undergoing HBOT exhibits the early signs of oxygen toxicity give him or her an air break, and consider lowering the pressure in the chamber. Alternatively, the physician can choose to end the treatment. In addition, eliminating fluorescent lighting in the chamber room decreases the risk of seizure.



Signs & Symptoms



Oxygen toxicity can lead to mild symptoms or progress rapidly to a seizure without prodromal symptoms. Careful attention to the patient throughout the treatment is key to identifying oxygen toxicity and intervening in a timely fashion.

The acronym **VENTID** identifies the early signs of oxygen toxicity:

V=changes in vision

E= ears including symptoms such as tinnitus

N=nausea

T=twitching

I=irritability

D=dizziness



Differential Diagnosis



FEVER

Most Seizures in a hyperbaric environment are not due to oxygen toxicity. The differential diagnosis includes hypoglycemia, fever, new seizure disorder, medications that lower the seizure threshold, electrolyte abnormalities and chemical or alcohol abuse.



Procedure



If the patient is observed or complains of any unusual neurologic symptoms have the patient take an air break. Immediately notify the physician supervising the treatment. Under the direction of the physician consider decreasing the pressure in the chamber or discontinuing the treatment. In the case of a seizure do not decompress the patient until seizure activity ceases.



Procedure



In diabetic patients check a blood glucose level to rule out hypoglycemia as the source of the seizure. The patient is sent to the emergency room for a seizure work up. If the seizure is secondary to oxygen toxicity the patient can resume HBOT. Prior to the next treatment incorporate an air break in the treatment protocol.









1. Patients will always exhibit one or more signs/symptoms prior to having a seizure in the chamber.







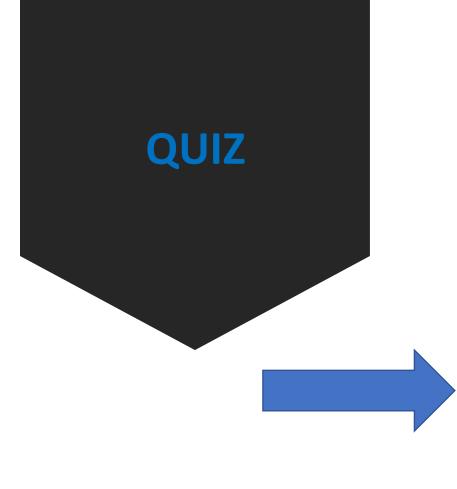
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- 2. Initially described by _____ in the late 19th century, exposure to high levels of oxygen can lead to acute oxygen toxicity.
- A. Dan Kelly
- B. Antonine Lavoisier.
- C. Paul Bert
- D. Ida Boerema





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A. Dan Kelly

B. Antonine Lavoisier.

C. Paul Bert

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3. Immediately decompress the patient if they are actively seizing?









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4. Most seizures in a hyperbaric environment are not due to oxygen toxicity?







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5. Name 3 causes of seizures other than oxygen toxicity.





5. Name 3 causes of seizures other than oxygen toxicity.

- 1. Hypoglycemia.
- 2. Fever.
- 3. New seizure disorder.
- 4. Medications that lower the seizure threshold.
- 5. Electrolyte abnormalities.
- 6. Chemical or alcohol abuse.





THANK YOU ALL SO MUCH!

HAVE A WONDERFUL HOLIDAY
SEASON?

-FROM: HENRY FORD HBO STAFF



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HBO Show Rate November 2021

Center	Program Director	Show Rate Percentage
Akron	Nick	96%
АСМН	Lisa	
Berkshire	Sean	93%
CHI Health CUMC/Bergan	Joe	
CHI Health Mercy	Joe	
Deborah	Megan	
Fairview	Jamie	100%
Henry Ford	Eliece	100%
Jackson	Dean	83%
St. Mary's	Katie	100%
St. Joseph Medical Center	Christine	83%
Via Christi	Nancy	99%
MH The Woodlands	Andrea	No Patients Yet
Inspira – Elmer	Ally	100%



2022 Clinic Elf



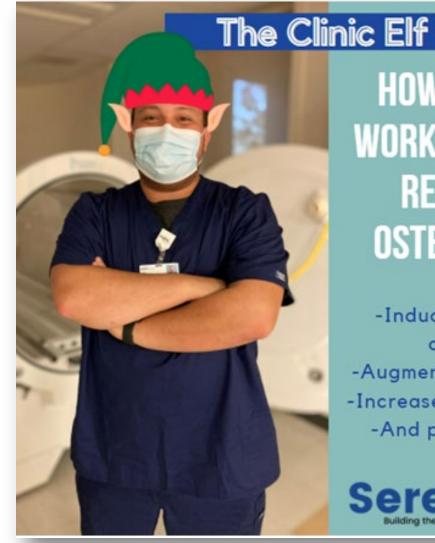
Facebook: SerenaGroupWC

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Wound Care & Hyperbaric Medicine

Instagram: serenagroup1



HOW DOES HBOT WORK FOR CHRONIC REFRACTORY OSTEOMYELITIS?

-Induce angiogenesis & osteogenesis

-Augment antibiotic therapy

-Increase osteoclast function

-And potential for More!







Register at www.serenagroupinc.com





2022 Monthly HBO Safety Webinar



2022 SerenaGroup Hyperbaric Safety Manual

SerenaGroup Monthly Safety Awareness Program

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- JANUARY
 - o AKRON NFPA Guidelines and SerenaGroup® Quality Metrics and Measures
- FEBRUARY
 - CHI HEALTH BERGAN: Identifying Hyperbaric Candidates in the Wound Care Center
- MARCH
 - DEBORAH Baratrauma
- APRIL
 - HENRY FORD To Dive or NOT to Dive?
- MAY
 - o JACKSON Clinical and Non-Clinical Emergencies and Preparedness
- IUNE
 - o ST. MARYS Diabetes Management for the Hyperbaric Patient
- IULY
 - THE WOODLANDS What can and cannot go into the chamber?
- AUGUST
 - o ST. JOSEPH Know the Resources Available for You and Your Patients
- SEPTEMBER
 - o VIA CHRISTI Clean Chambers are Safe Chambers
- OCTOBER
 - INSPIRA HEALTH ELMER Physiology of HBOT for Each Indication and When to Consider Continuation
- NOVEMBER
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- DECEMBER
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Who's Next?



Date: January 18, 2022

Presenting: Cleveland Clinic – Akron General

Topic: NFPA Guidelines and SerenaGroup® Quality Metrics and Measures

