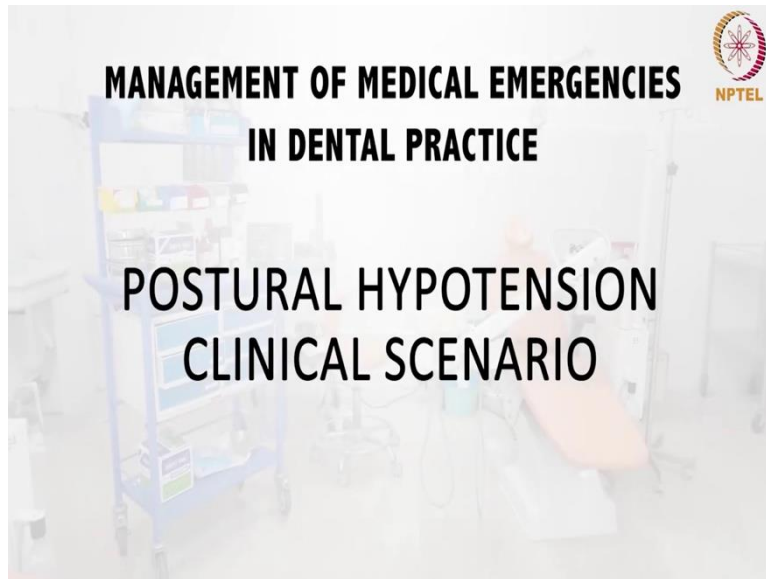


Management of Medical Emergencies in Dental Practice
POSTURAL HYPOTENSION - CLINICAL SCENARIO

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In this video, we are going to look about the diagnosis and management of postural hypotension in a dental office. Postural hypotension is defined as a drop in systolic blood pressure of at least 20 mm Hg, or of diastolic BP of at least 10 mm Hg within 3 minutes of standing, when compared with blood pressure from the sitting or supine position.

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The predisposing factors for postural hypotension are drugs such as diuretics, beta blockers, hypnotics and sedatives, varicose veins, prolonged period of recumbency, late-stage pregnancy, physical exhaustion, or Shy Drager Syndrome. First, we should know how to diagnose postural hypotension.

The simple diagnostic test to confirm postural hypotension is to check the blood pressure of the patient for 3 minutes with 1 minute interval. In this scenario, the blood pressure is normal. Yet to conclude with a diagnosis of postural hypotension, the procedure is started and continues for around 45 minutes.

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After the procedure, the patient gets up from the dental chair abruptly and faints, the blood pressure is checked again. And now there is a decrease in the systolic blood pressure of 25 millimetre Hg and diastolic blood pressure of around 10 millimetre Hg indicative of postural hypotension. Now let us see how to manage postural hypotension.

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The doctor now positions the chair in the Trendelenburg position, making the head end lower than the feet vital signs are checked. Assessment of circulation is done and oxygen is administered.

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After the patient recovers to consciousness. Slowly the chair is repositioned by around 22.5 degrees in 2 to 3 increments. If there is a delay in recovery for more than 3 to 4 minutes, call for medical assistance and continue basic life support as needed.