

Note:

- The fluid volumes mentioned are approximate.
- The fluid replacement should be just sufficient to maintain effective circulation during the period of plasma leakage.
- The recommended intravenous fluids are Normal saline, Ringers Lactate or 5% DNS.
- One should keep a watch for Urine output, liver size and signs of pulmonary oedema. Hypervolemia is a common complication.
- Normally intravenous fluids are not required beyond 36 to 48 hrs.
- Normally change should not be drastic. Do not jump from R-3 to R-5 since this can overload the patient with fluid. Similarly, reduce the volume of fluid from R-5 to R-4, from R-4 to R3, and from R-3 to R-1 in a stepwise manner.
- Remember that ONE ML is equal to 15 DROPS. In case of micro drip system, one ml is equal to 60 drops. (if needed adjust fluid speed in drops according to equipment used).
- It is advised to start with one bottle of 500 ml initially, and order more as and when required. The decision about the speed of IV fluid should be reviewed every 1-3 hours. The frequency of monitoring should be determined on the basis of the condition of the patient.

5.12 Indication of Platelet transfusion

1. Platelet count less than 10000/cu.mm in absence of bleeding manifestations (Prophylactic platelet transfusion).
2. Haemorrhage with or without thrombocytopenia.

Packed cell transfusion/FFP along with platelets may be required in cases of severe bleeding with coagulopathy. Whole fresh blood transfusion doesn't have any role in managing thrombocytopenia.

Platelets can be classified as random donor platelets (prepared by buffy coat removal method or by platelet rich plasma method), BCPP (buffy coat pooled platelet) and single donor platelets (SDP) or aphaeretic platelets (AP).

The details of the different platelet products are given at Annexure II.

5.13 Vaccine for dengue infection

Till now there is no licensed vaccine available against dengue viral infection. Several trials are ongoing in the world for the development of tetravalent dengue vaccine. So far phase III trials of a recombinant, live attenuated tetravalent dengue vaccine (CYD-TDV) has completed in Five Asian countries in children which may be promising in preventing dengue infection in near future.²¹