

유소아 기관절개술에 대한 임상적 고찰

정명현 · 김세현 · 장미숙 · 이준협 · 한재욱 · 이주환

A Clinical Study of Tracheotomy in Pediatrics

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ABSTRACT

Background and Objectives : Tracheotomy, although an inevitable procedure in some situations, is often avoided in pediatrics for its frequent and serious complications. So, authors studied clinical characteristics of tracheotomy as observed in pediatrics. **Materials and Methods** : 138 children who underwent tracheotomy during the past twenty years since 1977 were investigated. We analyzed distribution of age and gender, annual frequency, causative disorders for tracheotomy and complications. **Results** : 1) Number of tracheotomy performed tended to be decreased with time ; 2) Tracheotomy was performed two times more frequently in males than in females, and most frequently below eight years old ; 3) Most frequent causative disease was head injury (27.5%) ; 4) Most frequent indication of tracheotomy was ventilator support (49.3%) ; 5) The history of endotracheal intubation before tracheotomy was 86.2% ; 6) The complications of the tracheotomy developed in 39.9%, with the most frequent complications being granulation formation (18.1%), followed by tracheal stenosis (17.4%). 7) Frequency of late complication was relatively lower in the shorter intubation period group (22.9%) than in the longer intubation period groups (51.5% and 33.3%) ; 8) Late complications were lower in the group who had not been supported by a ventilator ; 9) Late complications did not occur in cases who were decannulated before 1 month. **Conclusion** : We found that factors associated with complications were duration of endotracheal intubation before tracheotomy, history of ventilator care and timing of decannulation. (**Korean J Otolaryngol 1998;41(11):1472-1477**)

KEY WORDS : Tracheotomy · Pediatrics · Complications.

1943 Galloway³⁾
1620 Nicholas Habicot
, 1766
Caron 가
1825 28
. ¹⁾ 1826 Bretoneau¹⁾가
5 , 가
1921 Jackson²⁾ 가
: 1997 12 29 / : 1998 10 9
: , 135 - 270 146 - 92 가 ,

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(Fig. 1).

1 5 15 가
 , 8
 가 92 (66.7%) 가 46 (33.3%)
 8
 2 : 1 (Fig. 2).
 1977 1996 20 15
 138
 1
 38 가 27.5%
 Guillian - Barre syndrome 29 (21.0%)
 18 (13.0%), 1
 5 (10.9%), 14 (10.2%),
 7 (5.1%)
 17 (12.3%)
 1 1
 가 68 (49.3%) 가
 가 38 (27.5%)
 가 32 (23.2%)
 1977 1996 20 138
 1977 23
 가 1978 14 1979 7 가
 1980 8 . 1981 19
 90 10 가 4.3 19 가 3-0 nylon
 91 1996 6 6.9 1980

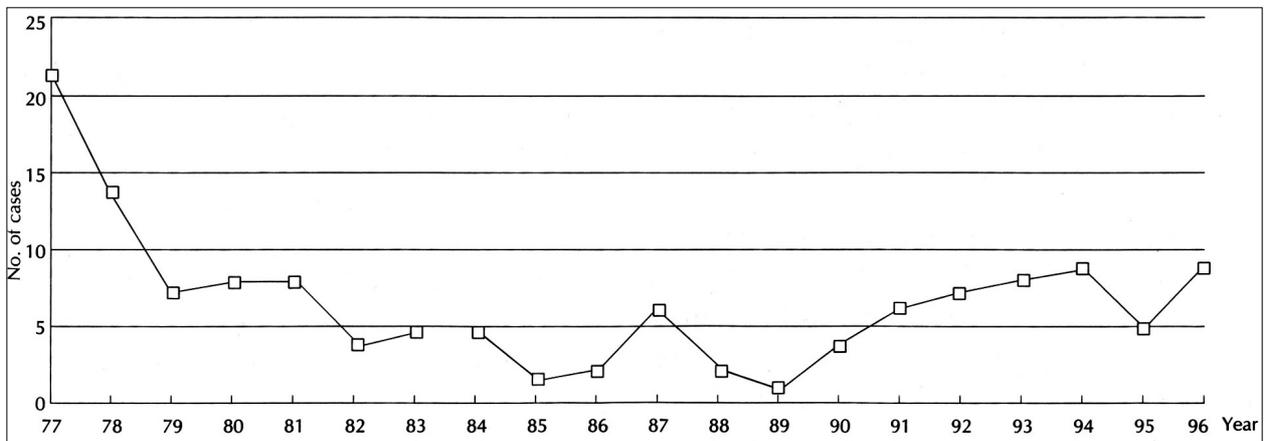


Fig. 1. Frequency distribution of tracheotomy in each year.

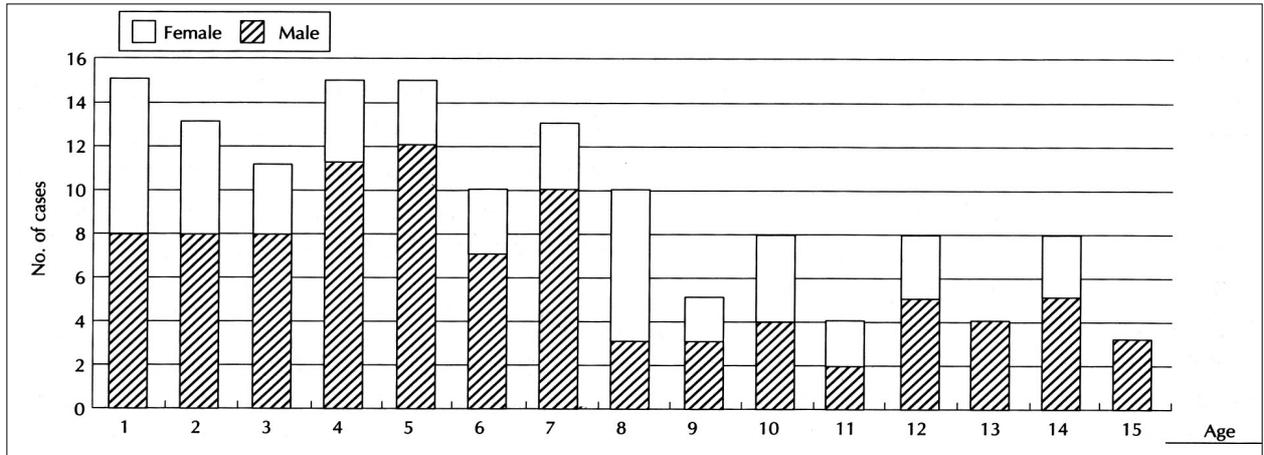


Fig. 2. Age and sex distribution of 139 patients with tracheotomy.

138 19 (13.8%)

119 (86.2%)

가 48 (40.3%) 가 1 2

가 21 (17.6%), 2 3 가 12 (10.1%),

3 4 가 9 (7.6%), 4

29 (24.4%)

138 39.9%

55 7

2

53 (38.5%) 1

25 , 24 ,

4 , 75 (54.3%)

. 8 (5.8%)

1 48 11 (22.9%)

3 33 17 (51.5%) 3 16 3

3 (33.3%) 3 4 9 (18.8%) 4

3 4 29 24 20 13

Table 1. Relations between ventilation support and late complications

	No. of cases	No. of complications (%)
Ventilation supported	78	36 (46.2)
Ventilation not supported	60	17 (28.3)
Total	138	53 (38.4)

Table 2. Relations between duration of cannulation and late complications

Duration(months)	No. of case	No. of complications (%)
< 1	23	
1 - 3	16	3 (18.8)
4 - 6	3	3 (100.0)
7 - 12	10	7 (70.0)
13 - 24	7	3 (42.9)
>24	8	7 (87.5)
Total	67	23 (34.3)

22 (75.9%)

78 36 (46.2%)

60

17 (28.3%) (Table 1).

65.0%

(Table 2).

8)

2

가 36 26 (72.2%)

가 ,
가

7 35 11 (31.4%)

6)9 - 12)

, 24 (68.6%)

가

가 13)
1 15 (10.8%)

8 (22.9%)

2 : 1

, 가

가 7)14)

가

가

4) 1943

6)9 - 12)

Galloway³⁾

100 150 cc

3/4

가

가

4)

6)9 - 12)15)

10

가

5) 가

가 가

16 - 18)

1

6)7)

가

16 - 18)

가

가가

Gaudet

6)

가

5

가

가

가

8)

70

1

1

15

2

가 . 가
 가 . 가
 20 . 가
 80 90 . 가 70
 가 . 가
 , ,
 , 가
 , 1
 가 가 ,

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