VOLUME-9, ISSUE-6, JUNE-2020 • PRINT ISSN No. 2277 - 8160 • DOI : 10.36106/gjra

Original Research Paper

Anaesthesiology

HAPPY HYPOXIA'A DILEMMA OF 2020

Minhas Ashish MD, Anaesthesiologist, Civil Hospital, Palampur, Kangra, Himachal Pradesh.

Dr J D Rana* MD Medicine Civil Hospital, Palampur, Kangra, Himachal Pradesh. *Corresponding Author

KEYWORDS : BP- Blood Pressure, HR- Heart Rate, SPO2-peripheral Saturation Of Oxygen, covid -19-coronavirus Disease 2019

INTRODUCTION

At the end of 2019, a novel coronavirus was identified as the cause of a cluster of pneumonia cases in Wuhan, China. Subsequently, the infection rapidly spread throughout the world, resulting in a global pandemic. The spectrum of COVID-19 in adults ranges from asymptomatic infection to mild respiratory tract symptoms to severe pneumonia with acute respiratory distress syndrome (ARDS)

and multiorgan dysfunction but some of patients are presenting with "silent" or "happy hypoxia," where the body's oxygen levels are well below 90 per cent, yet they're still able to breathe normally. No shortness of breath, no fast or shallow breathing, and likely no signs, symptoms, or sense that something may be off. Patients are unaware their bodies are deprived of oxygen and while they should be gasping for air, but instead appear to be perfectly normal and comfortable.[1]

CASE REPORT

60 year old male presented to the emergency department with complaint of fever from last two days and mild discomfort during respiration. There was no history of travelling. Patient was comfortable and cooperative during examination. On examination bp was 110/60, HR was 121 and spo2 was 37 % on room air ,cvs was normal and on chest there was decrease air entry left side. Such happy hypoxia created dilemma and panic in the emergency department, Patient was taken to the isolation ward and oxygen therapy was started on oxygen saturation was improved significantly. All routine investigation was made and covid -19 test was done which was negative. On x ray reporting there was severe lung fibrosis of the left lung. Later patient was shifted to medicine department where he was treated and significantly improved and was discharged after three days.

DISCUSSION

Happy Hypoxia is a state where body's oxygen concentration gets lower (to about 60%) in a patient infected with Covid-19 virus but not so low that patients feel uncomfortable. They can behave normally till they deteriorate rapidly and collapse. Patients with advanced Idiopathic Pulmonary Fibrosis frequently have resting hypoxemia[2]. Development of worsening hypoxemia and increasing oxygen requirements are common indicators of disease progression and increased risk of mortality[3]. Severe dyspnea with ambulation, functional limitation secondary to dyspnea and the presence of pulmonary hypertension are common features that indicate the need to consider ambulatory oxygen supplementation. Assessment of resting oxygenation by pulse oximetry easily performed and often obtained at each clinical encounter, particularly in patients with advanced disease As medical practitioners around the world are busy treating people for Covid-19, many have reported a condition called 'silent' or 'happy' hypoxia, in which patients have extremely low blood oxygen levels, yet do not show signs of breathlessness. The condition has puzzled medical practitioners, and many are now advocating for its early detection as a means to avoid a fatal illness called **Covid Pneumonia.**

CONCLUSION

During covid 19 pandemic happy hypoxia can cause dilemma. Happy Hypoxia can be present with other lung diseases, Always need proper examination and investigation to prevents such panic and dilemma.

REFERENCES

1. The invisibility of COVID-19's 'happy hypoxia'Some patients appear normal, yet their oxygen levels are 'seemingly incompatible with life.'Diana Duong May 14, 2020
2. du Bois RM, Weycker D, Albera C, et al. Six-minute-walk test in idiopathic pulmonary fibrosis: test validation and minimal clinically important difference. Am J Respir Crit Care Med 2011; 183:1231.
3. Nishiyama O, Taniguchi H, Kondoh Y, et al. A simple assessment of dyspnoea as a prognostic indicator in idiopathic pulmonary fibrosis. Eur Respir J 2010; 36:1067.