



BED SORE OVER THE OCCIPITAL REGION IN A 2-YEAR-OLD BOY: A RARE CASE

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Bed sores develop when the skin is exposed to continuous pressure for an extended period of time, which leads to ischemia (less supply of oxygen and nutrients) and ultimately causes tissue necrosis. This happens due to inadequate medical attention in the hospital during hospital stay, but the incidence rate varies depending on different clinical settings, but it typically falls between 4% and 38%. Consequentially, it increases the chance of dying. Generally, bed sore is quite rare in the head, and that is also in a two-year-old child. Mostly stage 1 and stage 2 bed sores resolve spontaneously, but stages 3 and 4 required comprehensive care, which also required prolonged hospitalization. A 2-year-old child was brought to the hospital with bed sores across his occipital region and in the lateral area of his head. For 30 to 40 minutes, the child had tonic-clonic involuntary movements of both upper and lower limbs, along with up rolling of the eyes, loss of consciousness, no involuntary passage of urine or stool, and foaming. An hour after the seizure, he started to have a fever. After the investigations, it turns out that he is suffering from refractory status epilepticus secondary to febrile infection with bed sores. Later, he was transferred to a multispecialty hospital upon the family member's request in order to receive better care.

Differential Diagnosis: Autoimmune/paraneoplastic encephalitis, occipital pressure sore, Deep tissue injury.



Figure 1: Bed Sores Over The Occipital Region