

Heatstroke

micro drip study guide

December 17, 2021

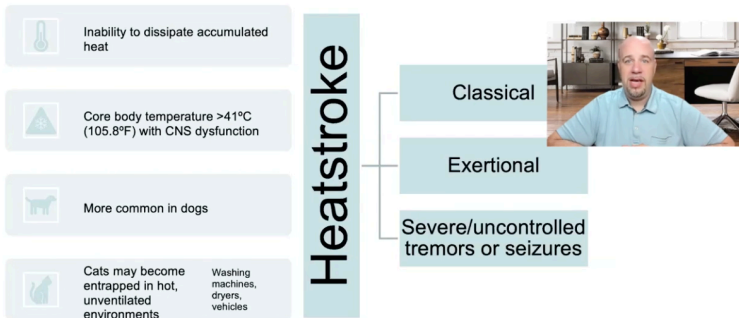
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Pathophysiology



Essentially, what we have in a patient with heatstroke is an inability to get rid of any of this accumulated heat. And this heat can be accumulated traditionally through exertional issues. It's very rare that you're going to be dealing with something like malignant hyperthermia. Yes, it's in the literature, but it just doesn't happen very often.

Usually, we're talking about the dogs whose owners took them out in the midday sun on a hazy, hot, and humid day and decided, oh, it's a good time to go play Frisbee. Or they had a brain fart and left their dog in the car inadvertently, OK? Every once in a while, we can see this with seizure patients, especially patients who have had clusters of seizures or who are presented in status epilepticus.

Regardless of the cause, we're talking about the body temperature getting very, very high, greater than 105.8 or 41 degrees Celsius. And there is some type of, hopefully temporary, but sometimes permanent dysfunction of the central nervous system.

Our feline friends are much more discerning little aliens than their canine counterparts, so heatstroke is much more common in dogs than cats. Usually, when a cat develops heatstroke, it's because of-- they've become entrapped somewhere that it shouldn't, OK, because curiosity can, if not kill a cat, at least cause it some bodily harm. So washing machines, dryers, vehicles are some classic examples there.