



## Outcomes of ventilated Guillain Barre Syndrome (GBS) patients at Vila Central Hospital intensive care unit (ICU)-An experience from a tertiary hospital in Vanuatu.

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### Abstract text

**Background:** GBS is an autoimmune demyelinating disease often as a sequelae acute diarrheal or flu-like illness that can lead to severe neuromuscular weakness requiring mechanical ventilation, prolonged hospital stay and sometimes death. The care of GBS at the Vila Central Hospital (VCH) ICU with its limited bed and staff capacity puts a strain on intensive care services. The objectives were: (1) To describe the prevalence of GBS admissions at VCH. (2) To describe the demographic and clinical characteristics of GBS patients ventilated at the VCH ICU. (3) To determine factors that may affect patient outcomes.

**Methods:** This was a retrospective descriptive study of patients admitted at the VCH for GBS since 2012. Participants were all patients ever admitted at the VCH ICU for GBS. Information was collected from patient folders, ward registers and patient information system and analyzed on excel.

**Results:** A total of 20 cases were identified to have been diagnosed with GBS at the VCH. 12 were females and 8 were males. 52% were ventilated. Mechanical ventilation was commenced within 2 days of arrival to VCH. The average length of stay in hospital for ventilated patients was 115 days. The average length of stay in ICU was 58 days. The average time patients spent on a ventilator was 40 days. 3 patients died in hospital one of which was mechanically ventilated. 2 patients have died since their discharge.

**Discussion:** GBS is a relatively rare condition but with a disproportionate burden on intensive care services. To ensure equity of patient care there is a need to: 1. Establish eligibility criteria for ICU admissions. 2. Expand and improve ICU services in Vanuatu.