# Assessment of Cerebral Perfusion Pressure by Transcranial Doppler in Pediatric Patients with Convulsive Status Epilepticus

# **Original Article**

# Volume 62, Pages 264-268, April 2025

Aritra Kapat<sup>1</sup> · Angana Bhattacharjee<sup>2</sup> · Kaushani Chatterjee<sup>1</sup> · Gobinda Mondal<sup>1</sup> · Asok Kumar Mandal<sup>1</sup>

<sup>1</sup>Department of Pediatric Medicine , Dr B C Roy Post Graduate Institute of Pediatric Sciences , 111, Narkeldanga Main Road, Kankurgachi, Phoolbagan , Kolkata , West Bengal 700054 , India; <sup>2</sup>Department of Pediatric Medicine , Infectious Diseases and Beleghata General Hospital , Kolkata , West Bengal , India.

Correspondence to: Gobinda Mondal, drgm1976@rediff mail.com; Aritra Kapat, doc.kapat@gmail.com; Angana Bhattacharjee, doc.angana94@gmail.com; Kaushani Chatterjee, dr.kaushani.chatterjee@gmail.com; Asok Kumar Mandal, mandalasok@gmail.com

Accepted: 21 February 2025 / Published online: 12 March 2025

https://doi.org/10.1007/s13312-025-00002-y

## ABSTRACT

#### OBJECTIVES

To study the changes in cerebral hemodynamics and cerebral perfusion pressure (CPP) in children with convulsive status epilepticus (SE) by bedside transcranial doppler (TCD).

#### METHODS

Transcranial doppler of bilateral middle cerebral artery (MCA) was performed in 42 antiepileptic drug naïve convulsive SE patients (1–12 years) within 30 min of seizure termination and in 42 hemodynamically stable patients with non-neurological symptoms without any pre-existing cardiovascular and renal pathologies. The mean flow velocity (Fvm), diastolic flow velocity (Fvd) and peak systolic velocity (PSV) were measured, and CPP was calculated.

## RESULTS

Mean (SD) Fvd, PSV, Fvm, and CPP in the right MCA in study group was 57.85 (3.57) cm/s, 139.90 (7.07) cm/s 85.19 (3.30) cm/s and 68.40 (4.91) mm Hg, respectively, and corresponding values in left MCA were 58.04 (3.35) cm/s, 139.90 (6.96) cm/s, 85.30 (3.20) cm/s, and 68.50 (4.93) mmHg. Alterations of Fvd, PSV, and Fvm and CPP were statistically significant in the study group compared to comparator group.

## CONCLUSION

Bedside TCD within 30 min of seizure termination in SE patients can detect alterations in cerebral flow velocities risking cerebral hypoperfusion.

**Keywords:** Cerebral hypoperfusion ·Convulsion ·Intracranial pressure ·Seizure ·Status epilepticus

## REFERENCES

1. Woods KS, Horvat CM, Kantawala S, et al. Intracranial and cerebral

# How to access full text of this article for IAP members?

The full text of articles published in the Indian Pediatrics from Jan 2025 onwards will be accessible freely only to the members of the Indian Academy of Pediatrics (IAP). Please follow the following steps to access the articles

## Steps

1. Go the Indian Academy of Pediatrics (IAP) website (<u>https://iapindia.org/</u>)

2. Login as member using your registered mobile number/ email and your password

(https://iapindia.org/member-login.php).

#### 3. You will now be directed

to <a href="https://iapindia.org/singlelogin/index.php">https://iapindia.org/singlelogin/index.php</a>

4. Scroll down to Indian Pediatrics Current Issue and click the icon. You will be directed

to https://link.springer.com/journal/13312

5. You will be able to access the desired article

6. In case you have forgotten your password, it can be reset using an OTP sent to your registered mobile number or email address.

7. In case of any difficulty, kindly contact the central office at <u>centraloffice@iapindia.org</u> or Phone: (022) 27710857

8. You may also write

to <a href="mailto:ip.subscription@iapindia.org">ip.subscription@iapindia.org</a> or <a href="mailto:jiap@iapindia.org">jiap@iapindia.org</a>

perfusion pressure thresholds associated with inhospital mortality across pediatricneurocritical care. Pediatr Critic Care Med. 2021;22:135–46.

2. Walton NY. Systemic effects of generalized convulsive status epilepticus. Epilepsia. 1993;34:S54–8.

3. Czosnyka M, Matta BF, Smielewski P, et al. Cerebral perfusion pressure in head-injured patients: a noninvasive assessment using transcranial Doppler ultrasonography. J Neurosurg. 1998;88:802–8.

4. Ramanan R, Joseph M. Utility of transcranial doppler in estimating cerebral perfusion pressure in traumatic brain injury: a prospective observational trial. Indian J Neurotrauma. 2017;14:152–5.

5. Rollet-Cohen V, Sachs P, Léger PL, et al. Transcranial Doppler use in non-traumatic critically III children: a multicentre descriptive study. Front Pediatr. 2021;9: 609175.

6. LaRovere KL, Tasker RC, Wainwright M, et al. Transcranial doppler ultrasound during critical illness in children: survey of practices in pediatric neurocritical care centers. Pediatr Crit Care Med. 2020;21:67–74.

7. O'Brien NF, Johnson HC, Musungufu DA, et al. Transcranial doppler velocities in a large healthy population of African children. Heliyon. 2023;9: e15419.

8. Tontisirin N, Muangman SL, Suz P, et al. Early childhood gender differences in anterior and posterior cerebral blood fl ow velocity and autoregulation. Pediatrics. 2007;119:e610–5.

9. Schmidt EA, Piechnik SK, Smielewski P, et al. Symmetry of cerebral hemodynamic indices derived from bilateral transcranial Doppler. J Neuroimaging. 2003;13:248–54.

10. Vollmer-Haase J, Folkerts HW, Haase CG, et al. Cerebral hemodynamics during electrically induced seizures. NeuroReport. 1998;9:407–10.

11. Bode H. Intracranial blood flow velocities during seizures and generalized epileptic discharges. Eur J Pediatr. 1992;151:706–9.

12. Adelson PD, Bratton SL, Carney NA, et al. American Association for Surgery of Trauma; Child Neurology Society; International Society for Pediatric Neurosurgery; International Trauma Anesthesia and Critical Care Society; Society of Critical Care Medicine; World Federation of Pediatric Intensive and Critical Care Societies. Guidelines for the Acute Medical Management of Severe Traumatic Brain Injury in Infants, Children, And Adolescents. Chapter 8. Cerebral Perfusion Pressure. PediatrCrit Care Med. 2003;4:S31–3.

13. Pottkämper JCM, Verdijk JPAJ, Aalbregt E, et al. Changes in postictal cerebral perfusion are related to the duration of electroconvulsive therapy-induced seizures. Epilepsia. 2024;65:177–89.

14. Gelfand JM, Wintermark M, Josephson SA. Cerebral perfusion- CT patterns following seizure. Eur J Neurol. 2010;17:594–601.

15. Nass RD, Hampel KG, Elger CE, et al. Blood pressure in seizures and epilepsy. Front Neurol. 2019;10:501.