The National Reye's Syndrome Foundation; Emergency Room Information

Emergency Room Information: (Printable Version)

Suspect Reye's in an Infant with:

* Diarrhea, but not necessarily vomiting

* Respiratory disturbances such as hyperventilation or apneic episodes, seizures and hypoglycemia are common

* Elevated SGOT-SGPT (SAT-ACT) [usually 200 or more units] in the absence of jaundice

Suspect Reye's in a Patient with:

* Unexpected vomiting following any viral illness such as a flu-like upper respiratory infection or chicken pox (usually no diarrhea)

* Elevated SGOT-SGPT (SAT-ACT) [usually 200 or more units] in the absence of jaundice

* Signs of disturbed brain function characterized by:

Lethargy	Drug reaction-like behavior
Staring	Extensor spasms
Stupor	Decerebrate rigidity
Agitated delirium	Screaming
Coma	Aspirin poisoning-like symptoms

For Early Diagnosis:

* Vomiting, think Reye's
* Emergency SGOT-SGPT (SAT-ACT)
* Elevated blood NH3
* Hypoglycemia and hepatomegaly may be present

Differential Diagnosis:

* Meningitis	* Sudden Infant Death
* Encephalitis	* Toxic Ingestion
* Diabetes	* Head Trauma
* Drug Overdose	* Renal or Hepatic Failure
* Poisoning	

Initial Treatment:

* 10% Glucose in maintenance salt solution
* Maintain airway and brain oxygen
* Consult a teaching hospital or children's hospital