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Ultrasound assessment of gastric volume in critically ill patients: response to Gültekin et al.

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Dear Editor,
We would like to thank Dr. Gültekin
et al. [1] for their interest in our study.
We appreciate their interesting
comments.

Dr. Gültekin's main point refers to
the underlying abdominal pathologies
of patients, which may have impacted
the delay of gastric emptying. We
acknowledge that these data were not
supplied in the manuscript [2].
Among the 9 patients with abdominal
disease, there were 3 with peritonitis,
2 with abdominal abscesses, 1 with
liver transplantation and 3 with acute
pancreatitis. Besides those patients

with specific abdominal pathologies,
trauma patients with miscellaneous
injuries but without specific intra-ab-
dominal processes had the highest
gastric volumes measured on CT scan
with 269 ml (51; 395) vs. 110 ml (73;
287) in the other patients. This could
be explained by the combination of
major pain scores and subsequent
important doses of opioids, which
favored massive ileus [3].

We consider our pilot study as a
stimulating report to call for further
explorations in the field of gastric
ultrasonography and intensive care
patients.

References

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