

CLINICAL CASE NUMBER 6



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68 Years old Gopal comes to my OPD at 5.30 pm, when I was almost about to leave the OPD for the day. He had severe cough for the last few hours. He is a known case of Diabetes mellitus, IHD, COPD due to asthma, CKD with much more metabolic complications. When I examined him for the complaints of cough my intention was to find out what was the cause of cough. In such a situation the cough could be arising because of lung infection or because of heart failure. If it is heart failure, it is much more a serious condition and you may lose the patient if not treated urgently. You may also have to assess the stage of the problem like impending heart failure or very chronic heart failure or an acute severe heart failure.

When I examined him all these questions came to my mind Since I had the x-ray and ultrasound machine here in my OPD, I immediately did an x-ray chest which showed an enlarged heart with little congestion in hilar region of lung . Rest of the lungs were clear ruling out lung pathology as the cause for his cough. I put him on echo machine, but the IVC was not dilated, further confirming that he was not in a serious condition. On the spot I could take the decision of sending him home with correct treatment and avoiding hospitalisation and undue cost.

Today it is a necessity that we try and avoid an unnecessary hospitalisation, thereby reducing the cost of treatment. This patient I could send home with correct line of treatment as he was in a very early stage of heart failure.He responded well to the right treatment and could go home to take the rest of the treatment at OPD level.