

# Management of Malignant Hyperthermia

## Manifestations

- Hypercarbia (the most sensitive indicator of potential MH in the OR)
- Tachycardia
- Tachypnea
- Temperature elevation (usually a late sign of MH)
- Hypertension
- Cardiac dysrhythmias
- Acidosis
- Hypoxemia
- Hyperkalemia (it should be considered first in case of cardiac arrest)
- Skeletal muscle rigidity (the most specific sign)
- Myoglobinuria

## Immediate Actions

- Call for help
- Stop triggering agents
- Hyperventilate patient with 100% oxygen, use high FGF
- Secure airway
- Finish or abort procedure
- Administer dantrolene
  - 2.5mg/kg bolus
  - repeat 2.5mg/kg every 5 minutes for total of 10mg/kg
  - After loading, start 1-2mg/kg/h infusion
- Cool patient
  - cold IV normal saline
  - cold body cavity lavage
  - ice bags to body
  - cold nasogastric lavage
  - cooling blanket

## Secondary Management

- Change to a clean circuit not exposed to volatile agents
- Monitor and treat acidosis
- Promote urine output
- Treat hyperkalemia
- Treat dysrhythmias with procainamide and calcium chloride
- Monitor creatinine kinase, urine myoglobin, and coagulation for 24-48 hours

## Management Adjuncts

- Consider urinary catheter
- Consider arterial and central venous monitoring