Symptomatic management of a child with cyclic vomiting syndrome

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DESCRIPTION

Cyclic vomiting syndrome (CVS) is a functional disorder characterised by recurrent, self-limited episodes of intractable nausea and vomiting that are not caused by any specific disease.¹ The episodes occur at variable intervals with prodromal phase of nausea and pallor. The mean age of onset is 3.9 years and the mean number of attacks per year is 4. The aetiology is unknown, but it is possibly because of a dysregulation of the neuroendocrine system, exaggerated cardiovascular responses to postural change and other stimuli that may be associated with the onset of gastrointestinal symptoms.²

A 27-month-old patient reported to the department of paediatric dentistry with symptoms of swollen gums and loose teeth in the lower front teeth region (figure 1). A detailed history revealed that the patient suffered from repeated episodes of fever and vomiting and was diagnosed with CVS. Blood investigations showed neutropenia, eosinophilia, thrombocytosis and the red blood cells on the peripheral blood smear appeared hypochromatic with anisopoikilocytosis, microcytes and ovalocytes.

Intraoral examination revealed generalised inflammation of the attached and marginal gingiva with grade II mobility of 71 and 81. Oral prophylaxis, debridement and irrigation with hydrogen peroxide were performed. Local application of metronidazole gel and sodium monofluorophosphate mouthwash with the importance of oral hygiene maintenance was advised and the patient was recalled after 1 week.

The symptoms subsided and patient was instructed to continue the same regimen for a

Figure 2 Postoperative photograph.

fortnight. On the subsequent visit, the inflammation had drastically come down and there was no mobility of 71 and 81 (figure 2).

Learning points

- ▶ The oral findings in the patients suffering from cyclic vomiting syndrome (CVS) may vary and it has not been explored in the literature to a greater extent.
- ▶ CVS can cause tooth sensitivity and erosion, cavities, periodontal disease, dry mouth, salivary gland enlargement and trauma to the oral tissue.
- ▶ The objective of the article is to review the important aspects of this disease, and discuss its potential significance as related to the oral findings and complications.

Contributors SM performed the treatment. DA collected articles. PKK took photographs. RM prepared the manuscript.

Competing interests None declared.

Patient consent Obtained.

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Figure 1 Preoperative photograph—inflamed gingiva and accumulation of plaque.

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