



"Les compressions trachéales par un anneau ou comment l'air peut faire la chanson"

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BINGE DRINKING: NOT AN INNOCENT PROBLEM

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More and more pediatricians are confronted with teen drinking and the problems that result from it. A new trend is the so called "binge-drinking". This means consumption of excessive amounts of alcohol in a very short period of time with the goal of getting drunk as fast as possible. Within 1 hour after ingestion, alcohol is absorbed in the stomach and small intestine. Toxic effects of alcohol can occur from a plasma concentration of 0.5-1 ‰ (= 500-1000 mg/l) or an intake of 600 mg/kg alcohol. This is equal to ingestion of 120 ml liquor (alcohol concentration 30%) in an adolescent of 40kg. The effects are caused by a suppression of the central nervous system and they occur faster in younger people than in adults due to less extracellular volume. Also individual factors like gender, use of other medications or drugs and drinking habits play a role. All this factors can result in a broad spectrum of symptoms (relaxation, altered perception of the environment, prolonged reaction time, amnesia, nausea, vomiting and in more severe cases respiratory depression, coma and death). When a child with possible alcohol intoxication is admitted to the emergency department, general "APLS" guidelines (Advanced Pediatric Life Support) should be followed. After the "acute" event of the alcohol intoxication, multidisciplinary follow-up of the patient is very important. In Belgium, there are data on Antwerp and Ghent university and college students. In this group, 12.8 % of male students does 'binge' at least weekly. In female students, this percentage is much lower: 3.6%. However, no objective data exist on the problem of binge drinking in the younger age groups, where the risk of adverse effects is even higher. Nevertheless, among pediatricians there is great concern about this phenomenon. Therefore, a national survey to assess the prevalence of binge drinking in minors is conducted at this moment.

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