

Abdominal Compartment Syndrome: A Decade of Progress

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Abdominal compartment syndrome is defined as a sustained intra-abdominal pressure (IAP) > 20 mmHg that is associated with new onset of organ dysfunction or failure. ACS is a separate and distinct entity from intraabdominal hypertension (IAH), which is defined as a sustained or repeated pathologic elevation of the IAP ~ 12 mmHg.

A common cause of IAH and ACS is fluid resuscitation. If >2 risk factors for IAH or ACS are present, a baseline measurement should be obtained, and then serial measurements performed during the patient's critical illness.

Mixed Critical Care ACS Incidence 0.5%-8%. (6-14% trauma) (20% burn). Mortality: General Trauma Patient 12-17% vs ACS Patient 43-64%.

Link: [https://www.journalacs.org/article/S1072-7515\(12\)01197-0/pdf](https://www.journalacs.org/article/S1072-7515(12)01197-0/pdf)