Fluid therapy plays an important role in the treatment of trauma patients with substantial blood loss, as well as in patients with burn injuries. The review prepared for the 19th meeting of the Expert Committee focused on these indications for the use of colloids in children. No evidence from randomized controlled trials could be identified (1, 2). All articles reviewed indicated that there was very little evidence available either for or against the use of colloids in children. Volume replacement with colloids is considerably more expensive than with crystalloids. The International drug price indicator guide (3) shows that the supplier median price for dextran 70 is almost 12 times higher than that for normal saline. In view of the low quality of evidence available on the clinical questions reviewed, the lack of evidence for the superiority of colloids compared with crystalloids in critically ill patients in general, and the higher cost of colloids, the Expert Committee decided that there is no justification for the inclusion of specific colloids for volume replacement in the EMLc. However, colloids would be added to EMLc for consistency with the EML and for use when safer alternatives are not available.

References: