assessors following a modified standardised checklist.

RESULTS
In the knowledge assessment 30% scored satisfactory. The objective assessment showed accuracy of HQCPR was significantly effective in controlled environment (p ≤ 0.01). The subjective assessment revealed most participants were able to perform satisfactorily in a controlled environment. Assistant medical officer were more competent in delivering a HQCPR compared to staff nurse (p ≤ 0.01). There were significant association between knowledge and competency on performing HQCPR among the PHC providers (p ≤ 0.01)

DISCUSSION
There were minimal interruptions of chest compression in the controlled environment. The instability factor along with small closed compartment and variability of speed of the ambulance may affect the performance of HQCPR. Another contributing factor is lack of knowledge update among providers. Standardised training and frequent evaluation of knowledge and skill is needed to maintain performance.

OP 6
FLEXIBLE INTUBATION VIDEO ENDOSCOPE IN ED HOSPITAL SERDANG
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INTRODUCTION
Endotracheal intubation is the gold standard for maintaining airway patency and protection in critically ill patients. Conventional direct laryngoscopy is commonly performed but has many potential complications especially in patients with difficult or failed airways. These complications can significantly increase morbidity and mortality and should be avoided.

Recognizing a difficult airway is a vital component in the intubation process. Proper preparation of equipments and strategies should be planned in such cases. One such strategy is the usage of flexible endoscopy for endotracheal intubation in both anticipated and unanticipated difficult airways.

CASE REPORT
We described a total of eight cases that were intubated using flexible endoscopic awake intubation in Emergency Department (ED) of Hospital Serdang. All eight cases were predicted to have difficult airways to intubate, and consist of both medical and trauma patients. All of the endotracheal intubations were performed successfully in this cohort of patients with no complications.

CONCLUSION
Flexible endoscopic intubation of the “awake” patient is a safe and effective method to be used in the Emergency Department. It is the method of choice for intubating the anticipated difficult airway group of patients. Awake intubation can considerably reduce the risk of hypoxia. It allows the procedure in the conscious, spontaneously breathing patient to remain oxygenated using topical anaesthesia and mild sedation only until the endotracheal tube is place.
INTRODUCTION
Between December 2015 and March 2016, hospitals in the Klang Valley, Malaysia received a number of patients with similar extreme presentation followed by dramatic recovery. Ten cases from three institutions were studied and their diseases progress was analyzed. It revealed an almost forgotten disease, which requires high index of suspicion to diagnose yet, cheap but highly effective medicine to treat.

CASE REPORT
Ten Burmese males whose age ranging from 22 to 41 years old presented with worsening shortness of breath associated with abdominal pain and vomiting. Eight patients had been under detention for seven to ten months for being illegal immigrants. Eighty percent of patients were in shock and respiratory distress with severe metabolic acidosis, requiring intubation and haemodynamic support. Majority of them also had acute kidney and liver injuries. Point of care echocardiography revealed severe dilatation of the right heart with pericardial effusion. Diagnosis of Shoshin Beriberi was subsequently made and all patients were treated with high dose of intravenous thiamine. Dramatic recoveries were observed in 90.0 percent of patients with reversal of the heart, kidneys and liver injuries.

DISCUSSION
Shoshin Beriberi is a forgotten disease in some part of the world. It is due to thiamine deficiency that affects cells metabolism leading into low output cardiac failure. The diagnosis relies on high index of suspicion based on the history and clinical presentation as well as the dramatic improvement after thiamine administration. Difficult access to thiamine-enriched meals for more than three months increases the risk of the disease. Burmese male has the risk of developing the disease possibly due to their habits and lifestyle.

CONCLUSION
Thiamine has an important role in cardiac dysfunction of unknown origin. Awareness must be instilled among detention centres and prisons as prevention of Shoshin Beriberi is better and cheaper than the cure.