



CONFERENCE ABSTRACT

Outcome of early bubble CPAP in children presenting at paediatric intensive care unit from 2016-2017

Madia Kazmi*

Abbasi Shaheed Hospital, Pakistan

1st International Growth
and Development
Conference (IGDC 2017)

March 16-18, 2017

Dubai, United Arab Emirates

Abstract

The aim of this study is to analyze the introduction of early continuous positive airway pressure (CPAP) for children admitted in PICU in correcting respiratory distress with or without hypoxaemia and impending respiratory failure in order to improve respiratory function, avoid the need for mechanical ventilation and its complications. **Objective:** To determine the outcome of early bubble CPAP in children admitted in paediatric intensive care of Abbasi Shaheed hospital. **Methods:** This pilot study is being conducted in paediatric intensive care of paediatric unit 2 department at Abbasi Shaheed hospital Karachi. The study was conducted from March 2016 to December 2016. The study design was cross-sectional study and sample technique was non probability (purposive). Total 70 patients of both genders having age ranging between 0-12 years exhibiting clinical features of respiratory distress with hypoxaemia ($SpO_2 < 92\%$) and impending respiratory failure initially received oxygen supplementation through bCPAP delivered via an underwater tube through nasal prongs. Data regarding outcome after receiving bCPAP and need for mechanical ventilation was collected and analyzed. **Results:** Oxygen was initiated by bCPAP in 70 patients. Out of these, forty-one (58.5%) were male and twenty-nine (41.2%) were females. The age group ranges from 0-12 years. Forty-nine (70%) patients survived after bCPAP and shift to ward. Twenty-one (30%) were intubated for worsening distress and hypoxaemia. Eight (11.4%) were removed from vent, put on bCPAP and survived. Ten (14.2%) expired on ventilatory support. **Conclusion:** According to our results early bubble CPAP supplementation helps in correcting respiratory illness and contributes to reduce the number of children requiring endotracheal tube intubation and mechanical ventilation. In addition to the benefits mentioned above, it is a simple device which can be made locally, very cheap and effective.

*Corresponding Author,
Email: drmediakazmi@hotmail.com