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| **Study reference** | **Study characteristics** | **Patient characteristics 2** | **Intervention (I)** | **Comparison / control (C) 3** | **Follow-up** | **Outcome measures and effect size 4** | **Comments** |
| Geng, 2020 | "Type of study:  Single center open label randomised trial"  "Setting and country:  Affiliated Hospital of Inner Mongolia University for Nationalities (Inner Mongolia Autonomous Region, China)"  "Funding and conflicts of interest:  None reported" | "Inclusion criteria:  Adult patients with a primary diagnosis of acute severe bronchial asthma according to GINA as diagnosed by two independent physicians, PO2<60mmHg under room air"  "Exclusion criteria:  Patient immediately required intubation; myocardial infarction; altered consciousness; hypotension (<60/90 mmHg); pregnancy; RR>45 breaths/minute; acidosis (<7.30 pH); untreated pneumothorax; ESRD (GFR<15 per 1.73 m2 or dialysis); contraindication for airway pressure devices; pneumonia"  N:36 (I: 16, C: 20), age: I 43 C 38 (sd: I 11 C 8)  I: 36%; C: 0.40% likely | HFNC with AIRVO-2, gas flow 30-40 L/min, titrated to achieve 92-96% oxygen saturation, temperature between 31 and 37 degrees Celsius, in addition to conventional asthma exacerbation treatment. | Conventional oxygen inhalation methods, including nasal cannula, venturi mask, and storage balloon mask, based on the patient's condition, aimed to achieve 92-96% O2 saturation, in addition to conventional asthma exacerbation treatment. | "Duration of follow-up: Duration of follow-up: During hospital stay  Loss-to-follow-up (n, reason): I: 0, na; C: 0, na  Incomplete outcome data (n, reason): I: 0, na;  C: 0, na" | Treatment failure: I: 6.25%; C: 5%, p=0.87 (95% CI: na)  Difference: 1.25% (95% CI: -18.06 to 23.71) (calculated by TC, Kennisinstituut, Federatie Medisch Specialisten)    Hospitalisation duration (days): I: 6.54 (sd: 1.85); C: 7.02 (sd: 2.32)  Mean difference: 0.48 days (95% CI: -0.97 to 1.93) (calculated by TC, Kennisinstituut, Federatie Medisch Specialisten) | Only p-values reported, furthermore a reasonably designed study in a small number of patients. |