

FAQs

1. At study completion will steroids be weaned?

At the completion of the study the steroids can be stopped without weaning. Adrenal suppression is very unlikely for this duration and dosage of steroids.

2. Why prednisolone and dexamethasone not just daily dexamethasone?

Dexamethasone theoretically will give a larger anti inflammatory effect early. This is what we commonly do for other inflammatory conditions such as croup

3. What if the patient is ready for discharge from PICU on day 2 do they continue their adrenaline / steroid regime on the ward?

No. The study is completed for the patient upon discharge from the ICU

4. There was also a lot of concern regarding the amount of adrenaline ie: 5 doses 1/2 hrly

This is understandably going to be challenging but it is less frequent than 20 minutely ventolin for instance and is only for 5 doses. Please REFER TO THE ADRENALINE ADMINISTRATION FOR DAB DOCUMENT

5. If a patient that is enrolled in the standard care group requires dexamethasone pre extubation for no leak does this then exclude them from the study? Likewise if a patient in the standard care group requires an adrenaline neb post extubation does this exclude them?

Dexamethasone would be part of standard care in a patient who has been ventilated for a period of time and where there is concern regarding subglottic swelling. As would nebulised adrenaline for post extubation stridor. These will be permitted for this indication as an intermittent dosing rather than regular dosing.

6. What is the minimum adrenaline dosage after the initial phase?

After the 5 doses the minimum dose would be 4 hourly so its not too subjective. On the ADRENLINE ADMINISTRATION FOR DAB DOCUMENT there is a tool to guide you on when to administer prn adrenaline

7. What if the HR goes above 180 during the adrenaline induction phase (ie the first 5 doses)

It is required that the HR falls below 180 before the next dose

If there are any concerns or queries regarding the conduct of this trial please seek advice from the investigators at your site, research nurse or email ben.gelbart@rch.org.au