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Continuous positive airway pressure to reduce the risk of early peripheral oxygen desaturation following apnoea onset in children: Randomised double-blind controlled trial


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dx.doi.org/10.17504/protocols.io.bqv5mw86 Jayme Marques

ABSTRACT

It was a randomised double-blind parallel controlled clinical trial, in a tertiary teaching hospital with 68 children, aging 2-6 years, ASA I-II, who presented for surgery under general anaesthesia, divided into two groups of 34 participants (CPAP and controls). The intervention was CPAP-ventilation and passive CPAP-oxygenation using the anaesthesia workstation. The main outcome measure was the occurrence of a SpO₂ of 95% during a follow-up period of 300 seconds from the beginning of the apnoea. We alternatively registered the time from the onset of apnoea until a SpO₂ of 95% (limited to 300 seconds) – with SpO₂ recorded each 30 seconds - (T1) and time from a SpO₂ of 95% to previous baseline levels aided by positive pressure ventilation (T2).  0 µl

ATTACHMENTS

[Study Protocol.docx](#)

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EXTERNAL LINK

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KEYWORDS

continuous positive airway pressure;; general anaesthesia, hypoxia, noninvasive ventilation, patient safety, paediatrics

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