Lisa vs. Insure: Which One is Appropriate? - A Cohort Study of PS Administration Technology in Preterm RDS in Multicenter of Anhui Province

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Abstract

Background: Pulmonary surfactant (PS) replacement therapy is well known as a necessary method to preterm respiratory distress syndrome (RDS). INSURE technique bring up injury of trachea and high incidence rate of bronchopulmonary dysplasia (BPD), while less invasive surfactant administration (LISA) caught increasingly attention.

Objective: Compare the outcomes and side effect between LISA group and INSURE group.

Methods: We collected 20 cases from eight neonatal intensive care units (NICU) in Anhui Province in China for LISA group and 36 cases from the first Hospital Affiliated of USTC for INSURE group, and the outcomes and side effect were analyzed.

Results: Re-intubation rate (20% vs 22.2%) and the incidence of BPD (40% vs 47.2%) in LISA group were lower than those in INSURE group, but there were no statistical differences. The mortality in two group show no diffrence.

Conclusion: LISA technique can decrease the re-intubation rate and BPD incidence without increasing mortality.

Full Text

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