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## Noninvasive Ventilation of Patients with Acute Respiratory Distress Syndrome, 3 Case Reports

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**Objectives:** The role of noninvasive ventilation (NIV) in acute hypoxemic respiratory failure has been increasingly investigated, but its impact on the management and outcome of the subset of patients with acute respiratory distress syndrome (ARDS) is still to be determined.

**Methods:** In the period of November- December 2018, three cases who were diagnosed as ARDS according to the Berlin Definition and who underwent NIV were presented. NIV with face mask was applied to 2 female and 1 male patients at the age of 53, 71 and 50 who were diagnosed as moderate ARDS. The duration between the onset of symptoms and NIV administration was approximately 3, 4, 3 hours, respectively.

**Results:** The first patient did not have a history of chronic disease and drug use. Moxifloxacin 400 mg IV, methylprednisolone 60 mg IV, NIV with face mask were started. The patient who underwent NIV in the intensive care unit for 2 days was admitted to the ward. The second patient was admitted to our hospital with respiratory distress after transfusion due to thrombocytopenia in another center. Piperacillin - tazobactam 13.5 gr IV, methylprednisolone 60 mg IV, NIV with face mask were started. After 3 days of intensive care follow-up, the patient was admitted to the ward. The third patient had 35 pack - year smoking history and chronic bronchitis. Moxifloxacin 400 mg IV, methylprednisolone 60 mg IV, NIV with face mask were started. He was admitted to the ward after 2 days of intensive care. Blood culture results were negative for three patients. The duration of hospital stay, Pao<sub>2</sub>/FIO<sub>2</sub> ratios, HACOR, APACHE II, SOFA scores were presented.

**Conclusion:** Early NIV in ARDS can prevent the progression of disease and the development of complications.

**Keywords:** Early, noninvasive, ARDS