Extended prone position ventilation in severe acute respiratory distress syndrome: A pilot feasibility study

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Objectives: The aim of the study was to evaluate the safety of extended prone position ventilation (PPV) and its impact on respiratory function in patients with severe acute respiratory distress syndrome (ARDS). Design: This was a prospective interventional study. Setting: Patients were recruited from a mixed medical-surgical intensive care unit in a university hospital. Patients: Fifteen consecutive patients with severe ARDS, previously unresponsive to positive end-expiratory pressure adjustment, were treated with PPV. Intervention: Prone position ventilation for 48 hours or until the oxygenation index was 10 or less (extended PPV). Results: The elapsed time from the initiation of mechanical ventilation to pronation was 35 ± 11 hours. Prone position ventilation was continuously maintained for 55 ± 7 hours. Two patients developed grade II pressure ulcers of small extent. None of the patients experienced life-threatening complications or hemodynamic instability during the procedure. The