Abstract Group: 2.2. Noninvasive Ventilatory Support
Keyword 1: COPD - management Keyword 2: Nursing care Keyword 3: Pharmacology

Title: Patient and health care providers (HCP) perception of sedation & comfort during acute non-invasive ventilation (NIV)

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Body: Introduction: Agitation, confusion and poor mask tolerance are main factors contributing to poor adherence and often failure of acute NIV. However, there is limited data in the use of sedation to enhance NIV adherence. Methods: Patients requiring NIV were included in a 12 month period from January to December 2012. Patient and health care providers (HCP) perceptions surrounding the use of sedation and comfort were measured following cessation of NIV and repeated 6 weeks post discharge. Results: 42 patients, 57% female (age 68.9±12.9 years) were included. 30% experienced an episode of agitation, confusion or aggressive behaviour. 21% were prescribed but only 11% received sedation during NIV. A higher tolerance throughout, and some perceived benefit during initiation of NIV was observed in patients in the ‘sedated’ group (figure1). 21% died prior to the 6 week follow up. Of the survivors, only 16% completed the post-discharge questionnaire. Prior to discharge, 50% of patients reported that they would accept sedation if offered and 66% perceived that this would improve their adherence. Conclusion: Sedation may aid NIV tolerance and adherence. Furthermore, it is acceptable to patients. These data highlight the need to consider the use of supplemental sedation during the use of acute NIV.