

不同自主呼吸试验方法在气管插管患者撤机时的应用

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摘要:目的 探讨不同自主呼吸试验方法在气管插管患者撤机时的应用效果。方法 采用对照试验方法,选取2014年6月—2016年1月收治于上海交通大学附属第一人民医院的外科术后机械通气患者62例,按手术先后顺序分为观察组和对照组各31例。对照组采用T管试验,观察组采用低水平压力支持通气(pressure support ventilation, PSV)模式进行自主呼吸试验,比较两组患者首次自主呼吸试验成功率、2次及以上自主呼吸试验成功率、撤机失败率以及气道保护能力。结果 观察组的首次自主呼吸试验成功率和撤机失败率优于对照组,差异有统计学意义($P < 0.05$);2次及以上自主呼吸试验成功率比较,两组差异无统计学意义($P > 0.05$);气道保护能力评估中,两组气道内分泌物及吸痰频率差异有统计学意义($P < 0.05$);咳嗽力量比较,两组差异无统计学意义($P > 0.05$)。结论 两种自主呼吸试验中,低水平PSV模式在首次自主呼吸试验成功率、撤机失败率、气道保护能力评估等比较中均优于T管试验,更适用于外科术后机械通气患者撤机前试验。

关键词:自主呼吸试验;机械通气;气管插管;撤机

中图分类号:R473

文献标识码:A

文章编号:1009-8399(2016)03-0022-04

Application of two spontaneous breathing trials in process of weaning from mechanical ventilation in patients with tracheal intubation (Shanghai First People's Hospital, Shanghai Jiao Tong University, Shanghai 200080, China)

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Abstract: Objective To explore the efficacy and safety of two spontaneous breathing trials (SBTs) in the process of weaning from mechanical ventilation in the patients with tracheal intubation. **Methods** From June 2014 to January 2016, 62 postoperative cases with mechanical ventilation in Shanghai First People's Hospital, Shanghai Jiao Tong University were chosen and divided into the control group ($n = 31$) and the observation group ($n = 31$) according to the order of operation. The control group adopted T-piece to conduct SBT, and the observation group adopted low-level pressure support ventilation (PSV). The success rate of first SBT, success rates of two and more SBTs, failure rate of weaning, and ability of airway protection were compared between the two groups. **Results** The low-level PSV was superior to T-piece in the success rate of first SBT and failure rate of weaning ($P < 0.05$), while the success rates of two and more SBTs were not statistically significant between the two groups. The ability of airway secretions and sputum aspiration was statistically significant ($P < 0.05$), while the cough strength was not statistically significant between the two groups. **Conclusion** Low-level PSV is superior to T-piece in the success rate of first SBT, failure rate of weaning and ability of airway protection. It is suitable for the pre-test of weaning from mechanical ventilation in the postoperative patients.

Key Words: Spontaneous breathing trial; Mechanical ventilation; Tracheal intubation; Weaning from mechanical ventilation

机械通气是重症监护室最常用的生命支持手段,

而应用时间长、撤机延迟以及撤离呼吸机失败导致的重复插管会带来各种风险和并发症,增加病死率,提前撤机会引起呼吸肌疲劳,最终依然会导致机械通气时