

首页 期刊简介 编委会 投稿指南 期刊订阅 审稿指南 常见问题 期刊荣誉 联系我们

引用本文:

[\[点击复制\]](#)

[\[点击复制\]](#)

[【打印本页】](#) [【在线阅读全文】](#) [【下载PDF全文】](#) [【查看/发表评论】](#) [【下载PDF阅读器】](#) [【关闭】](#)

[←前一篇](#) | [后一篇→](#)

[过刊浏览](#)

[高级检索](#)

本文已被: 浏览226次 下载52次

加温湿化高流量鼻导管氧疗在1~3月龄婴儿肺炎伴低氧血症中的应用

刘祥蕾, 杨林风, 吴长生



码上扫一扫!

字体: [加大+](#) | [默认](#) | [缩小-](#)

(安徽省宿州市立医院, 安徽宿州 234000)

摘要:

目的: 观察加温湿化高流量鼻导管氧疗(HFNC)对1~3月龄肺炎患儿伴低氧血症的临床疗效。方法: 分析2016年10月至2017年9月我院PICU收治、未达到机械通气指征的1~3月龄伴有低氧血症的肺炎患儿, 采用随机数字表法分为HFNC治疗组、经鼻持续气道正压通气(nCPAP)治疗组和普通鼻导管吸氧治疗组(对照组), 比较三组临床疗效, 治疗前和治疗后1 h、12 h、24 h的PaO₂、P/F、呼吸频率等指标, 患儿主要症状体征消失时间和住院时间, 气漏发生情况。结果: 与对照组比较, HFNC组和nCPAP组有效率明显增加(46.7% vs. 90.0%、86.7%, P<0.05), 但HFNC组与nCPAP组比较差异无统计学意义(P>0.05); HFNC组和nCPAP组患儿治疗过程中出现气漏例数明显减少(P<0.05)。HFNC组和nCPAP组治疗后患儿的三凹征、呼吸急促、肺部啰音消失时间及平均住院时间与对照组比较明显缩短(P<0.05), 但HFNC组和nCPAP组比较差异无统计学意义(P>0.05); 与对照组比较, HFNC组与nCPAP组在治疗后1 h、12 h、24 h PaO₂、P/F升高, 呼吸频率减慢(P<0.05), 但HFNC组和nCPAP组比较差异无统计学意义(P>0.05)。结论: HFNC治疗1~3月龄伴有低氧血症的肺炎患儿有显著疗效, 损伤小, 是一种适宜1~3月龄婴儿的无创呼吸支持技术。

关键词: [加温湿化高流量鼻导管氧疗](#) [肺炎](#) [低氧血症](#) [婴儿](#)

DOI: [doi:10.13407/j.cnki.jpp.1672-108X.2019.10.007](https://doi.org/10.13407/j.cnki.jpp.1672-108X.2019.10.007)

基金项目:

Application of Heated Humidified High Flow Nasal Cannula Oxygen Therapy in the Treatment of Pneumonia with Hypoxemia for Infants from 1 to 3 Months

Liu Xianglei, Yang Linfeng, Wu Changsheng
(Suzhou Municipal Hospital, Anhui Suzhou 234000, China)

Abstract:

Objective: To observe the clinical efficacy of heated humidified high flow nasal cannula oxygen therapy (HFNC) in the treatment of pneumonia with hypoxemia for infants from 1 to 3 months. Methods: Children with pneumonia and hypoxemia aged from 1 to 3 months who were admitted into PICU of our hospital from Oct. 2016 to Sept. 2017 and did not meet the mechanical ventilation indication were extracted. All children were divided into HFNC treatment group, nasal continuous positive airway pressure (nCPAP) treatment group and normal nasal catheter oxygen treatment group (control group) by the random number table method, and appropriate treatment was given. The clinical efficacy, PaO₂, P/F, respiratory rate and other indicators before treatment and after treatment of 1 h, 12 h and 24 h, disappearance time of main symptoms and signs, length of stay and occurrence of air leak were compared among three groups. Results: Compared with the control group, the effective rate of HFNC group and nCPAP group increased significantly (46.7% vs. 90.0%, 86.7%, P<0.05), but there was no significant difference between the HFNC group and the nCPAP group (P>0.05). The number of cases of air leak in the HFNC group and nCPAP group significantly reduced during the treatment (P<0.05). The disappearance time of three concave sign, shortness of breath and lung rales, and the average length of stay in the HFNC group and the nCPAP group were significantly shorter than those in the control group (P<0.05), but there was no significant difference between the HFNC group and the nCPAP group (P>0.05). Compared with the control group, PaO₂ and P/F increased and respiratory rate decreased after treatment of 1 h, 12 h, and 24 h in the HFNC group and the nCPAP group (P<0.05), but there was no significant difference between the HFNC group and the nCPAP group (P>0.05). Conclusion: The efficacy of HFNC in the treatment of pneumonia with hypoxemia for infants from 1 to 3 months is significant with minimal damage. It is a non-invasive respiratory support technology and suitable for infants from 1 to 3 months.

Key words: [heated humidified high flow nasal cannula oxygen therapy](#) [pneumonia](#) [hypoxemia](#) [infants](#)

版权所有: 《儿科学杂志》编辑部 渝ICP备17000198号-1

地址: 重庆市渝中区中山二路136号重庆医科大学儿童医院内 邮政编码: 400014

电话: 023-63626877; 023-63633143 传真: Email: ekyxzz@cqmu.edu.cn

技术支持: [北京勤云科技发展有限公司](#)

 渝公网安备 50010302002124号