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Other Applications: Pregnancy and Neonates Baiborodov, B.D.

Some Peculiarities in Application of Hyperbaric Oxygenation During the Treatment of Acute Respiratory Insufficiency in Newborn Infants.

In: Abstracts VII Int. Cong. HBO Medicine, Moscow, Sept. 2-6, 1981; p368.

HBO was used in 830 newborn infants: in 555 infants with asphyxia, in 165 infants with syndrome of respiratory disturbances (SRD) and 110 infants with the aspiratory syndrome (AS). During the treatment of asphyxia an early use of HBO, 1-5 min after artificial pulmonary ventilation (APV), as compared with a late use of HBO, 10-30 min after APV, leads to a decrease of cerebral circulatory disorders by 4 time a, and or mortality rate by 8 times. During the treatment of SRD, the employment of HBO in the First 1-3 hrs of life led to recovery of 75% of infants. The delayed use of HBO, 12-48 hrs after birth is ineffective. HBO applied in the first hour of life during the treatment of AS prevented the development of aspiratory pneumonia in 92.7% of cases. HBO should be used during the treatment of neonatal asphyxia in combination with APV, infusion "alkalizing" therapy, and during the treatment of SRD and AS it should be combined with cardial, anti-bacterial, infusion, "alkalizing" therapy. The duration of sessions should not be less than 1.5-2 hrs and not more than 3 hrs at 2-3 ATA for 10-15 min and at 1.4-1.5 ATA for 1.5-2.5 hrs. When these conditions are met acid-base balance and blood gases normalize. If necessary, such sessions are repeated in 6-9 hrs; to delay them for 12-30 hrs is not advisable. Thus, effectiveness of HBO during the treatment of acute hypoxic states in new-born infants depends on its early, complex and repeated application under safe resuscitation and therapeutic regimes.

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