



Outcome of Smear Positive Pulmonary Tuberculosis Patients with Acute Respiratory Failure on Non Invasive Ventilation in a Tertiary Care Hospital.

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Abstract:

Pulmonary tuberculosis (PTB) coupled with Acute Respiratory Failure (ARF) usually heralds a dismal patient outcome¹. Admission to the Intensive Care Unit (ICU) along with Invasive mechanical ventilation (IMV) in PTB patients is usually associated with very high mortality². Non-invasive Ventilation (NIV) when applied early in such patients has the potential to prevent intubation and improve prognosis in terms of reduced morbidity and/or mortality³. We conducted a prospective study in our Institute where NIV was applied to 35 patients with smear-positive PTB who had concurrent ARF. Fourteen patients (40%) improved on NIV and were later discharged on treatment (survivors). The remaining patients (60%) were candidates for IMV but none survived. Statistically significant predictors of mortality in our study were multiple courses of anti-tubercular treatment in the past, advanced disease as assessed radio-graphically, presence of leucocytosis, drug resistance and pH < 7.25. Our study is unique in the fact that it has addressed NIV in active PTB on which very scant literature is available. Our results indicate that a significant proportion of PTB patients with ARF may benefit from NIV based on astute and diligent patient selection and prompt institution of the procedure along with ATT and other supportive therapy. Our study also provides some tentative evidence that patients who fail NIV may not benefit from IMV. How much of this is due to the advanced lung disease and poorer metabolic status of the patient along with co-existent nosocomial infections needs to be elucidated by further studies.

Biography:

Dr Amit Sharma has completed his MBBS and MD in Pulmonary Medicine from Delhi University at age of 28. He is currently working as a Senior TB and Chest Specialist in NITRD for more than 9 years. He has guided the dissertations of Post Graduate Students and is closely associated with teaching and training activities in NITRD. Post PG experience is of more than 14 Years and has Case Reports published in International Journals as first and second author.



Recent Publications:

- 1 Levy H, Kallenbach JM, Feldman C, Thorburn JR, Abramowitz JA. Acute Respiratory Failure in Active Tuberculosis. Crit Care Med. 1987; 15:221-5
- 2 Frame R, Johnson M, Eichenhorn M, Bower G, Popovich J. Active Tuberculosis in the Medical Intensive Care Unit: A 15-year Retrospective Analysis. Crit Care Med. 1987; 15: 1012-14
- 3 Filiz K, Levent D, Eme E, Pelin U, Turky A, Aybuke K. Characteristics of Active Tuberculosis Patients Requiring Intensive Care Monitoring and Factors Affecting Mortality. Tuberculosis and Respiratory Diseases 2016; 79:158-64
- 4 Suren J, Nemat, Hanna J, drzejewska, Alessandro Prescimone, Agnieszka Szumna, Konrad Tiefenbacher. Catechol[4] arene: The Missing Chiral Member of the Calix[4]arene Family. Organic Letters 2020, 22 (14) 5506-5510. <https://doi.org/10.1021/acs.orglett.0c01864>
- 5 Toni Haubitz, Leonard John, Daniel Freyse, Pablo Wessig, Michael U. Kumke. Investigating the Sulfur “Twist” on the Photophysics of DBD Dyes. The Journal of Physical Chemistry A 2020, 124 (22) , 4345-4353. <https://doi.org/10.1021/acs.jpca.0c01880>

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