
Bölüm 13

FiO₂, Pozitif Ekspiryum Sonu Basınç ve Ortalama Havayolu Basıncı

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- **Giriş**
- **Hipokseminin Patofizyolojisi**
 - Şant
 - V/Q Uyumsuzluğu
 - Difüzyon Kusuru
 - Hipoventilasyon
 - Azalmış Kardiyovasküler Fonksiyon
- **FiO₂**
 - O₂ Toksikitesi
 - %100 O₂
- **Pozitif Ekspiryum Sonu Basınç (PEEP)**
 - Fizyolojik Etkiler
 - Endikasyonlar
 - ARDS için PEEP
 - Ortalama Havayolu Basıncı
- **Oksijenasyon Yönetimi**
- **Hatırlanacak Noktalar**
- **Ek Okumalar**

Ek Okumalar

- Aggarwal NR, Brower RG, Hager DN, et al.** Oxygen exposure resulting in arterial oxygen tensions above the protocol goal was associated with worse clinical outcomes in acute respiratory distress syndrome. *Crit Care Med.* 2018;46(4):517-524.
- Meade M, Mercat A, et al.** Higher vs lower positive end-expiratory pressure in patients with acute lung injury and acute respiratory distress syndrome: systematic review and meta-analysis. *JAMA.* 2010;303(9):865-873.
- Brower RG, Lanken PN, MacIntyre N, et al.** Higher versus lower positive end-expiratory pressures in patients with the acute respiratory distress syndrome. *N Engl J Med.* 2004;351(4):327-336.
- Di Marco F, Devaquet J, Lyazidi A, et al.** Positive end-expiratory pressure-induced functional recruitment in patients with acute respiratory distress syndrome. *Crit Care Med.* 2010;38(1):127-132.
- Fan E, Del Sorbo L, Goligher EC, et al.** An official American Thoracic Society/European Society of intensive care medicine/society of critical care medicine clinical practice guideline: mechanical ventilation in adult patients with acute respiratory distress syndrome. *Am J Respir Crit Care Med.* 2017;195(9):1253-1263.
- Fumagalli J, Berra L, Zhang C, et al.** Transpulmonary pressure describes lung morphology during decremental positive end-expiratory pressure trials in obesity. *Crit Care Med.* 2017;45(8):1374-1381.
- Hess DR.** Approaches to conventional mechanical ventilation of the patient with acute respiratory distress syndrome. *Respir Care.* 2011;56(10):1555-1572.
- Kacmarek RM, Villar J, Sulemanji D, et al.** Open lung approach for the acute respiratory distress syndrome: a pilot, randomized controlled trial. *Crit Care Med.* 2016;44(1):32-42.
- Meade MO, Cook DJ, Guyatt GH, et al.** Ventilation strategy using low tidal volumes, recruitment maneuvers, and high positive end-expiratory pressure for acute lung injury and acute respiratory distress syndrome: a randomized controlled trial. *JAMA.* 2008;299(6):637-645.
- Mercat A, Richard JC, Vielle B, et al.** Positive end-expiratory pressure setting in adults with acute lung injury and acute respiratory distress syndrome: a randomized controlled trial. *JAMA.* 2008;299(6):646-655.
- Miller RR 3rd, MacIntyre NR, Hite RD, Truitt JD, Brower RG, Morris AH.** Point: should positive end-expiratory pressure in patients with ARDS be set on oxygenation? Yes. *Chest.* 2012;141(6):1379-1382.
- Pirrone M, Fisher D, Chipman D, et al.** Recruitment maneuvers and positive end-expiratory pressure titration in morbidly obese ICU patients. *Crit Care Med.* 2016;44(2):300-307.
- Schmidt GA.** Counterpoint: should positive end-expiratory pressure in patients with ARDS be set based on oxygenation? No. *Chest.* 2012;141(6):1382-1384.
- Villar J, Kacmarek RM, Perez-Mendez L, Aguirre-Jaime A.** A high positive end-expiratory pressure, low tidal volume ventilatory strategy improves outcome in persistent acute respiratory distress syndrome: a randomized, controlled trial. *Crit Care Med.* 2006;34(5):1311-1318.
- Walkey AJ, Del Sorbo L, Hodgson CL, et al.** Higher PEEP versus lower PEEP strategies for patients with acute respiratory distress syndrome. A systematic review and meta-analysis. *Ann Am Thorac Soc.* 2017;14(Supplement_4):S297-S303