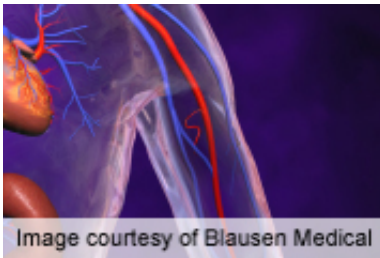


ISICEM: Septic shock death equal with high, low BP target

March 19 2014



(HealthDay)—For patients with septic shock undergoing resuscitation, 28- and 90-day mortality is not significantly different with high- or low-target arterial pressure. This research was published online March 18 in the *New England Journal of Medicine* to coincide with presentation at the International Symposium on Intensive Care and Emergency Medicine, held from March 18 to 21 in Brussels.

Pierre Asfar, M.D., Ph.D., from the University Hospital of Angers in France, and colleagues randomized 776 patients with [septic shock](#) to undergo [resuscitation](#) with a high or low blood-pressure target. The mean arterial pressure of the high-target group was 80 to 85 mm Hg, while that of the low-target group was 65 to 70 mm Hg.

The researchers observed no significant between-group difference in mortality at 28 days (36.6 percent in the high-target group versus 34.0

percent in the low-target group; hazard ratio in the high-target group, 1.07; $P = 0.57$). No significant difference was seen in mortality at 90 days (43.8 versus 42.3 percent, respectively; hazard ratio, 1.04; $P = 0.74$). Compared with the low-target group, the incidence of newly diagnosed atrial fibrillation was higher in the high-target group.

"Targeting a mean [arterial pressure](#) of 80 to 85 mm Hg, as compared with 65 to 70 mm Hg, in patients with septic shock undergoing resuscitation did not result in significant differences in mortality at either 28 or 90 days," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

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Citation: ISICEM: Septic shock death equal with high, low BP target (2014, March 19) retrieved 2 May 2024 from <https://medicalxpress.com/news/2014-03-isicem-septic-death-equal-high.html>

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