

With ARDS, doctors should keep ventilatorinduced injury in mind

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(HealthDay)—When applying evidence-based recommendations for



mechanical ventilation in patients with acute respiratory distress syndrome (ARDS), clinicians should be aware of the mechanisms of ventilator-induced lung injury and the rationale behind interventions to mitigate injury, according to a literature review published in the October issue of the *Annals of the American Thoracic Society*.

Lorenzo Del Sorbo, M.D., from the University of Toronto, and colleagues conducted a literature search and narrative review of the <u>experimental evidence</u> relating to the pathophysiology of ventilator-induced lung injury in order to help clinicians apply clinical recommendations for mechanical ventilation to individual patients.

The researchers note that many studies have been performed with the aim of improving understanding of the pathophysiological impact of mechanical ventilation. These have formed the basis for clinical trial design. Understanding of the mechanisms of ventilator-induced lung injury has been advanced by translational research, thereby informing intervention designs that improve survival in ARDS patients.

"Because daily management of patients with ARDS presents the challenge of competing considerations, clinicians should consider the mechanism of ventilator-induced lung injury, as well as the rationale for interventions designed to mitigate it, when applying evidence-based recommendations at the bedside," the authors write.

Three authors disclosed ties to pharmaceutical and medical device companies.

More information: Abstract/Full Text

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