

Mortality no different for no sedation versus light sedation in ICU patients

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(HealthDay)—For mechanically ventilated intensive care unit (ICU)

patients, mortality at 90 days is no different for those randomly assigned to no sedation and those assigned to light sedation with daily interruption, according to a study published online Feb. 16 in the *New England Journal of Medicine* to coincide with the Society of Critical Care Medicine annual Critical Care Congress, held from Feb. 16 to 19 in Orlando, Florida.

Hanne T. Olsen, M.D., from Odense University Hospital-Svendborg Hospital in Denmark, and colleagues conducted a multicenter randomized trial involving 700 mechanically ventilated ICU patients. Participants were randomly assigned to either a plan of no sedation (nonsedation group) or a plan of light sedation (sedation group) with daily interruption.

The researchers found that the mean Richmond Agitation and Sedation Scale score increased from -1.3 on day 1 to -0.8 on day 7 in the nonsedation group and from -2.3 on day 1 to -1.8 on day 7 in the sedation group. At 90 days, mortality was 42.4 and 37.0 percent in the nonsedation and sedation groups, respectively (difference, 5.4 percentage points; 95 percent confidence interval, -2.2 to 12.2 ; $P = 0.65$). There was no [significant difference](#) noted between the trial groups in the number of ICU-free days or ventilator-free days. Participants in the nonsedation and sedation groups had a median of 27 and 26 days free from coma or delirium, respectively.

"The plan of no [sedation](#) resulted in no important differences in the number of ventilator-free days or in the length of ICU or hospital stay," the authors write.

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