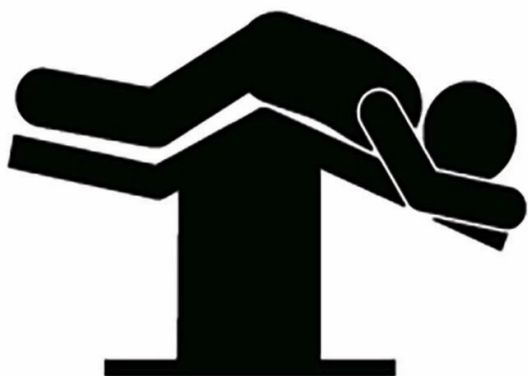


# Prone position ups oxygenation in patients with severe COVID-19

19 June 2020



Compared with baseline, one hour after initiation of the prone position, oxyhemoglobin saturation (SpO<sub>2</sub>) increased (range, 1 to 34 percent; median, 7 percent). The levels of supplemental oxygen were unchanged during the first hour of the prone position in all patients; however, one hour after initiation of the prone position, 19 patients had SpO<sub>2</sub> ≥95 percent. Of those with SpO<sub>2</sub> ≥95 percent, seven (37 percent) required [intubation](#) compared with five of six patients (83 percent) whose SpO<sub>2</sub> remained

(HealthDay)—The use of the prone position for awake, spontaneously breathing patients with COVID-19-related severe hypoxemic respiratory failure is associated with improved oxygenation, according to a research letter published online June 17 in *JAMA Internal Medicine*.

Alison E. Thompson, M.D., from the Columbia University Vagelos College of Physicians and Surgeons in New York City, and colleagues investigated whether the [prone position](#) is associated with improved oxygenation and decreased risk for intubation in consecutive spontaneously breathing [patients](#) with severe hypoxemic respiratory failure related to severe COVID-19. Twenty-nine eligible patients were asked to lie on their stomachs for as long as tolerated up to 24 hours daily.

The researchers found that 25 patients had at least one awake session of the prone [position](#) lasting longer than one hour. Four patients refused the prone position and were intubated immediately.

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