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Surfactant therapy of A/H1N1 severe pneumonia and ARDS is a chance for survival

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44 patients with A/H1N1 severe pneumonia and ARDS were followed-up. All
the patients had severe respiratory failure, bilateral pneumonia and were diag-
nosed with A/H1N1 by means of PCR and serological test. 30 patients (group I,
PaO2/FiO2<200 mm Hg) had the following treatment: CMV (FiO2=0.8-1, PEEP
14-20 cm, H2O), Oseltamivir (150 mg, 2 times a day, 7-14 days) and surfactant
(Surfactant-BL, Russia) at a dose of 3 mg/kg, 2 times a day, during 2-5 days, en-
dobronchially; 14 patients (group II) with less manifestation of respiratory failure
did not have CMV, received Oseltamivir (75 mg, 2 times a day, 7-14 days) and
Surfactant-BL at a dose of 75 mg, 2 times a day, by inhalation, during 2-3 days.
6-8 hours after the beginning of surfactant therapy, the parameters of oxygenation
in group I were improved significantly (PaO2/FiO2 increased up to 260-280 mm
Hg, FiO2 decreased to 0.4-0.5, PEEP decreased to 8-10 cm H2O). CMV period
lasted 10-21 days. 2 patients of 30 died. Group II had fast involution of pneumonia
according to clinical and X-ray characteristics. All 14 patients survived. Early use
of surfactant was of great importance. It is necessary to start surfactant therapy
during the first or second day of CMV. Inhalation administration is very efficient
at early stages of pneumonia development, prevents ARDS and requires less dose
of surfactant. Early usage of surfactant therapy in complex treatment of A/H1N1
severe pneumonia and ARDS can help a patient to survive.