Tracheostomy

Timing

Although early tracheostomy (ET) is recommended for patients with severe stroke, the optimal timing of tracheostomy for patients with intracerebral hemorrhage (ICH) remains controversial.

Early tracheotomy was defined as intervention no more than 7 days after initiation of mechanical ventilation. late as tracheostomy placement after 7 days or no tracheotomy.

Strategies

Surgically Created Tracheostomy (SCT)

Percutaneous Dilatational Tracheostomy (PDT).

In a randomized clinical trial, there were significant differences between two groups of patients in terms of duration of receiving mechanical ventilation (P=0.04), duration of tracheostomy procedure (P=0.001) and procedure expenses (P=0.04). There was no significant difference between two groups in terms of age and gender of patients, duration of ICU stay and complications of tracheostomy including copious bleeding, stomal infection, subcutaneous emphysema and airway.

PDT can be considered as the preferred procedure in cautiously selected patients during their ICU stay $^{1)}$.

Tracheostomy in Spontaneous Intracerebral Hemorrhage

Tracheostomy in Spontaneous Intracerebral Hemorrhage.

Tracheostomy in traumatic brain injury

Tracheostomy in traumatic brain injury.

1)

Valizade Hasanloei MA, Mahoori A, Bazzazi AM, Golzari SE, Karami T. Erratum: Percutaneous Dilatational Tracheostomy and Surgically Created Thracheostomy in ICU Patients. J Cardiovasc Thorac Res. 2014;6(1):43-46. Epub 2014 Mar 21. PubMed PMID: 24753831.

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Last update: 2024/06/07 02:53