عنوان مقاله:

Comparison of Intravenous Dexamethasone and Budesonide Nebulizer in the Treatment of Infantile Respiratory Distress Syndrome; A Randomized Clinical Trial

محل انتشار:

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خلاصه مقاله:

Background: Respiratory distress syndrome (RDS) is one of the most common causes of mortality in preterm infants. Despite appropriate results of corticosteroids prescription for preventing RDS, early use of these medications after birth has raised concerns about short and long-term complications. Inhaler corticosteroids have lower systemic absorption and have been considered to decrease short and long term complications of systemic corticosteroids to minimum. Objectives: In this randomized clinical trial we aimed to assess effectiveness of intravenous dexamethasone and budesonide nebulizer in treatment of infantile respiratory distress syndrome. Methods: In this randomized clinical trial preterm infants with confirmed diagnosis of RDSwere randomly allocated to two groups; the first group received intravenous Dexamethasone (۰.۱۵ mg/kg every ۱۲ hours) and the second group received Budesonide nebulizer (۲۰۰ µg/ day) through jet nebulizer. Treatment duration, complicationsand received doses as well as response to treatment and mortality rates were recorded in a checklist. Results: Finally ۶۰ infants (۳۵ female and ۲۵ male) in Budesonide and Dexamethasone groups underwent analysis. Mean arterial oxygen saturation was ۸۸.۶۰±۳.۲۱ % in Budesonide and ۸۸.۱۳±۳.۷۳% in Dexamethasone group before intervention (p=۰.۶۰۶). In the fifth day of intervention it was ۹۳.۸۰±۲.۱۴% in Budesonide and ۹۳.۲۵±۳.۷۶ in Dexamethasone group (p=۰.۴۴۱). Prior to intervention, Budesonide group had a mean respiratory rate (RR) of ۷۱.۵۰±۱۲.۳۳ and it was ۶۷.۱۷±۱۲.۸۴ in Dexamethasone group (p=۰.۱۸۸). In the fifth day of intervention, infants had a mean RR of ۴۵.۶۶±۸.۸۷ in Budesonide and ۴۸.۲۱±۱۰.۱۱ in Dexamethasone group (p= ۰.۱۷۹). Mean hospitalization duration was ۱۶.۳۶±۱۱.۳۲ days in Dexamethasone and ۱۷.۴۰±۱۴.۳۹ in Budesonide group (p=۰.۷۵۸). Conclusion: We concluded that there is no significant difference between intravenous Dexamethasone and Budesonide nebulizer for treatment of infantile RDS.

کلمات کلیدی: