Percutaneous dilatational versus conventional surgical tracheostomy in intensive care patients.

Youssef TF, Ahmed MR, Saber A.

Source

Department of Otolaryngology, Faculty of Medicine, Suez Canal University, Egypt.

Abstract

BACKGROUND:

Tracheostomy is usually performed in patients with difficult weaning from mechanical ventilation or some catastrophic neurologic insult. Conventional tracheostomy involves dissection of the pretracheal tissues and insertion of the tracheostomy tube into the trachea under direct vision. Percutaneous dilatational tracheostomy is increasingly popular and has gained widespread acceptance in many intensive care unit and trauma centers.

AIM:

Aim of the study was to compare percutaneous dilatational tracheostomy versus conventional tracheostomy in intensive care patients.

PATIENTS AND METHODS:

64 critically ill patients admitted to intensive care unit subjected to tracheostomy and randomly divided into two groups; percutaneous dilatational tracheostomy and conventional tracheostomy.
RESULTS:

Mean duration of the procedure was similar between the two procedures while the mean size of tracheostomy tube was smaller in percutaneous technique. In addition, the Lowest SpO(2) during procedure, PaCO(2) after operation and intra-operative bleeding for both groups were nearly similar without any statistically difference. Postoperative infection after 7 days seen to be statistically lowered and the length of scar tend to be smaller among PDT patients.

CONCLUSION:

PDT technique is effective and safe as CST with low incidence of post operative complication.