Percutaneous tracheostomy without bronchoscopy: A safe procedure

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**Background:** Tracheostomy is a common procedure in ICU, particularly as an approach for weaning from mechanical ventilation. In mid-1980s percutaneous tracheostomy (PCT) was introduced as a less invasive alternative for the standard surgical tracheostomy. A tracheostomy facilitates weaning from mechanical ventilation, in long-term ventilated patients, by improving airway cleaning, better patient comfort, and decreasing airway resistance. Prolonged mechanical ventilation has a main complication i.e., ventilator-associated pneumonia. In such cases early tracheostomy may reduce that complication.

**Methods:** We analyzed prospectively 104 adult patients mean age of 53 years who underwent PCT at our ICU between 2012 and 2014. Inclusion criteria were: age >18 years and indication for tracheostomy. Exclusion criterion was technical contraindication for PCT. All the PCT were performed at bedside using Ciaglia technique.

**Results:** Among 104 patients, reasons for PCT were: Weaning failures in 82 (78.85%) and airway protection in 22 (21.15%). The most frequent reasons for admission to the ICU were: Sepsis in 18 (17.31%), pneumonia in 17 (16.35%) and stroke in 7 (6.73%). The mean duration of preceding translaryngeal intubation was 9 days. The mean length of ICU stay was 14 days. We observed one complication in one patient; it was a tracheal stenosis. 66 patients (63%) died during their stay in the ICU. These deaths were unrelated to the PCT, but related to severe organ dysfunction. 38 patients (36.54%) survived and was discharged from the hospital, 37 was decannulated.

**Conclusion:** PCT, in our series, was a safe and practical procedure for bedside management of critical patients.

**Biography**
Emidio Jorge Santos Lima is a MD, Master in Computer Modeling and PhD in Knowledge Diffusion. He has developed clinical studies, in the last 9 years, on weaning from mechanical ventilation. He is a Professor at University Salvador – Laureate International Universities Network and has published a book and some papers in reputed journals. Recently, he finished an international multicenter study on lung ultrasound score as one predictor of weaning from mechanical ventilation at the University of Paris – France.

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