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* Medline Abstract for Reference 1 of ‘Management of meconium aspiration syndrome’

OBJECTIVE: Meconium aspiration syndrome (MAS) is a major cause of respiratory morbidity and mortality in term infants. We reported our pilot experience on the use of diluted bovine lung surfactant lipid extract solution (Surfactant Research Laboratories, Ohio, USA) as a tracheobronchial lavage fluid for the treatment of infants with severe MAS. Our goal was to establish the safety and the effectiveness of this procedure before organizing a randomized controlled trial. METHODOLOGY: Six infants with severe MAS necessitating mechanical ventilation with an oxygen index of ≥15 within 6 hours of life recruited consecutively during a 11⁄2-year period were treated with tracheobronchial lavage with 15 mL/kg of diluted surfactant solution (Surfactant) at a phospholipid concentration of 5 mg/mL administered in 2 mL aliquots. The outcome of treatment was assessed by comparison with 6 consecutive historic control infants with equally severe MAS of similar inclusion criteria retrospectively. RESULTS: The mean oxygen index, mean airway pressure, fraction of inspired oxygen, and arterial/venous oxygen tension ratio improved significantly within the first 48 hours after treatment in the lavage group. The duration of ventilation (mean ± SEM, 35.3 ± 4.6 hours vs 131 ± 60 hours) and oxygen therapy (mean ± SEM, 4.1 ± 0.5 days vs 20.8 ± 8.2 days) were also significantly reduced in the lavage-treated group compared with the control group. All 6 patients in the lavage group survived without sequelae whereas there were 2 deaths in the control group. The process of administering the surfactant lavage was well tolerated with no air leak complications. CONCLUSIONS: Our experience suggested that surfactant lavage seems to be an effective and safe method for treatment of severe MAS. A multicenter randomized controlled trial is indicated to further study the efficacy of this treatment.

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