

ResMed India conducts training on NIV in Lucknow

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Non- invasive Ventilation is a newer way of providing pulmonary ventilation to a patient without a need to perform any invasive procedure



ResMed Academy which is the clinical arm of ResMed in India conducted one-day workshop on the application of Non-invasive ventilation in hospital and homecare environment - where more than 30 renowned and eminent chest Physicians/pulmonologists attended in Lucknow on Feb 24, 2019, at Hotel Radisson.

Non- invasive Ventilation is a newer way of providing pulmonary ventilation to a patient without a need to perform any invasive procedure. The ventilation is provided to the patient through mask and an air tube connected to the ventilator. It is recommended in various Respiratory diseases.

This workshop covered both theoretical and hands-on learning on the application of Non-invasive ventilation in various respiratory diseases including acute hypercapnic respiratory failure, acute hypoxemic respiratory failure, chronic respiratory failure.

Chronic Obstructive Pulmonary Disease (COPD) is a common, preventable and treatable disease that is characterized by persistent respiratory symptoms and airflow limitation that is due to airway and/or alveolar abnormalities usually caused by significant exposure to noxious particles or gases. The chronic airflow limitation that is characteristic of COPD is caused by a mixture of small airways disease (e.g., obstructive bronchiolitis) and parenchymal destruction (emphysema), the relative contributions of which vary from person to person.

It is one of the leading causes of deaths in India, especially during winters. A survey claimed 12 lac plus deaths in 2017-18 through both outdoor and indoor pollution. The most common causes and risk factors for COPD are smoking, passive smoking, fumes, chemical and dust in construction sites.

Patients benefit from NIV as it provides pressure support and which assists patient's breathing. This decreases their work of breathing (WOB) and improves quality of life.

The symposium was started by a short welcome address by Dr Ashwini Mandanna, Clinical Specialist, ResMed Academy, followed by detailed discussion on role of NIV in acute respiratory failure by Dr. S. N Gupta, Director, Sanjeevani Lung center, Lucknow.

The next topic NIV in home- when and how was taken by Dr B P Singh, Director, Midland Hospital and Research Center chaired by Dr Surya Kant, Head of Department, Respiratory Medicine, KGMU, Lucknow.

Further, the guidelines, NIV device setting, monitoring and trouble shooting was taken by Dr Arunesh Kumar, Maharaj Agrasen, National Heart Institute, Dr Ashwini Mandanna, Dr Bhaskar Azad, Clinical Head, ResMed Academy, Dr A K Singh, Senior Pulmonologist, Apollo Medics Hospitals, Lucknow, the session was chaired by Dr Ved Prakash, Associate Professor, Respiratory and critical care medicine.

On the occasion, Dr. A K Singh said, "I congratulate, ResMed Academy for conducting such educational workshop that sensitizes and improves the knowledge of upcoming doctors, hence increasing the adoption of NIV. NIV is widely used tool in acute care settings, which is widely used nowadays in treating both sleep apnea and respiratory disorders. Such symposium makes doctors more hands-on with the advancements in NIV innovations and treat patients in better way."

Dr B P Singh praised ResMed Academy's effort and said, "NIV are one of the most promising and advanced innovation in treating respiratory disorders. It not only addresses the breathing problems, but touches the undiagnosed conditions like obesity, hypertension and sleep apnea."

"Such symposiums (ResTalk) not only benefits doctors but helps patients in advanced stage of respiratory dysfunctions. The future of healthcare such as telemedicine can be also benefited with NIV innovations", he added.

A non-conventional ventilator which people normally believe can be usually used with the mask, maintaining patient's awake fullness, ability to communicate and eat and drink. This offers the major advantage, avoiding sedation, and patient comfort, ambulation movement), patient recovery, decreased cost to the patient, early discharge.