

使用適應支持型通氣於呼吸器脫離期病患之照護經驗

驗

Respiratory care experience of a patient using adaptive support ventilation during weaning process

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摘要

呼吸器困難脫離一直是呼吸照護過程中的重要課題，導致困難脫離的原因與內因性肺疾或長期的病程有關，而重覆嘗試脫離的過程，會延長病患使用呼吸器的時間，而使影響成功脫離的變數更多，也增加醫療資源的耗用。因此，如何能使呼吸器依賴患者成功的脫離呼吸器，讓醫療資源有效利用，是呼吸治療師的重要責任。本病患因肺炎導致呼吸衰竭，住加護病房期間曾進行數次呼吸器脫離未能成功，於住院第29天轉入呼吸照護中心；之後，曾嘗試使用適應支援型通氣以便能及時掌握病患的呼吸系統機械性能與呼吸需求，給予適當的通氣支援，以免延誤脫離的時機。但因持續出現血行動力參數不穩及感染、腸阻塞導致腹脹而使肺部擴張受到限制、營養不良與體液電解質不平衡等問題，使呼吸器脫離失敗。藉此病患的呼吸照護過程以探討其脫離失敗的原因，並對適應支援型通氣模式在呼吸器脫離時的臨床調整、評估及所扮演的角色加以深入探討。

Abstract

Difficult weaning from mechanical ventilator is an important clinical issue in the field of respiratory care for critically ill patients. The reasons for difficult weaning are usually related to intrapulmonary pathological processes or long-term course of disease. The duration of repeated weaning trials will prolong the patient's ventilation time. The longer of the patient on the ventilator, the possibility of successful weaning will decrease. In the same time, the consuming of medical resources will increase. Therefore, how to wean the ventilator-dependant patient as soon as possible in order to relocating the medical resources effectively is an important responsibility of respiratory therapist. This patient was admitted in intensive care unit due to acute respiratory failure resulting from pneumonia. She was intubated and installed

mechanical ventilation. After his condition was improved, weaning from the ventilator was tried for several times but failed. Twenty-nine days later, she was transferred to the respiratory care unit. Adaptive support ventilation was used as weaning mode in order to provide an automatic adaptation of the ventilator settings to patient's passive and active respiratory mechanics. Because of the persisted hemodynamic instability, infection, intestinal obstruction, malnutrition, and fluid and electrolytes unbalance, she was finally failed to wean from the ventilator. In this report, the course of respiratory care, the reasons of weaning failure, and the role of adaptive support ventilation in weaning trial of this patient will be discussed.