

بسم الله الرحمن الرحيم



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شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



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جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

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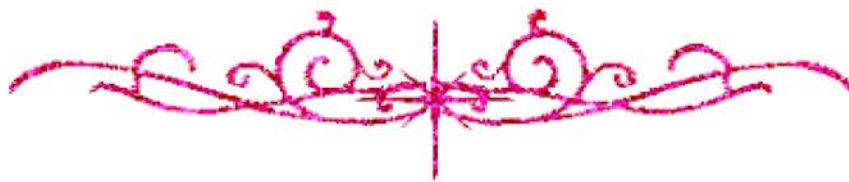
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لم ترد بالأصل



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**AN EVALUATIVE STUDY OF NON-INVASIVE
POSITIVE PRESSURE VENTILATION IN THE
TREATMENT OF PULMONARY EDEMA**

THESIS

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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

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INTRODUCTION



Introduction

Pulmonary edema is quite simply an abnormal accumulation of extravascular water in the lungs. With greater accumulation of extravascular water resulting in alveolar edema, clinically important effects invariably develop. Thus one way to classify pulmonary edema is by its location (either interstitial or alveolar edema). Pulmonary edema can be also classified according to its cause: cardiogenic, non cardiogenic, high pressure and increased permeability edema.⁽¹⁾

Patients with acute cardiogenic pulmonary edema (ACPE) are commonly seen in the emergency department (ED). Although the majority of patients respond to conventional medical therapy, some patients require at least temporary ventilatory support. Traditionally, this has been accomplished via endotracheal intubation and mechanical ventilation, an approach that is associated with a small but significant rate of complications.

The past two decades have witnessed increasing interest in methods of non invasive ventilatory support (NVS).⁽²⁾

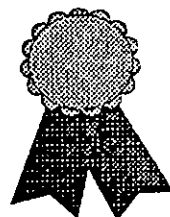
Non invasive ventilation is easily instituted and generally well tolerated by patients.⁽³⁾

Non invasive ventilation has been advanced as a means of avoiding the morbidity of endotracheal tube in patients with acute respiratory failure.⁽⁴⁾

Two different modes of non invasive ventilation have been applied, continuous positive airway pressure (CPAP) and bilevel positive airway pressure (BiPAP).⁽⁵⁾

Recently, it has been shown to provide early physiological improvement and reduce the need for intubation and invasive mechanical ventilation.⁽⁶⁾

AIM OF THE WORK



Aim of the Work

The aim of this work is to study the value of non invasive positive pressure ventilation as adjunctive therapeutic modality to conventional medical treatment in patients with pulmonary edema.

REVIEW OF LITERATURE

