

Study reveals most critically ill patients with COVID-19 survive with standard treatment

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Clinicians from two hospitals in Boston report that the majority of even the sickest patients with COVID-19—those who require ventilators in intensive care units—get better when they receive existing guideline-

supported treatment for respiratory failure. The clinicians, who are from Massachusetts General Hospital (MGH) and Beth Israel Deaconess Medical Center, published their findings in the *American Journal of Respiratory and Critical Care Medicine*.

During the COVID-19 pandemic, hospitals around the world have shared anecdotal experiences to help inform the care of affected patients, but such anecdotes do not always reveal the best treatment strategies, and they can even lead to harm. To provide more reliable information, a team led by C. Corey Hardin, MD, Ph.D., an Assistant Professor of Medicine at MGH and Harvard Medical School, carefully examined the records of 66 critically ill patients with COVID-19 who experienced respiratory failure and were put on ventilators, making note of their responses to the care they received.

The investigators found that the most severe cases of COVID-19 result in a syndrome called Acute Respiratory Distress Syndrome (ARDS), a life-threatening lung condition that can be caused by a wide range of pathogens. "The good news is we have been studying ARDS for over 50 years and we have a number of effective evidenced-based therapies with which to treat it," said Dr. Hardin. "We applied these treatments—such as prone ventilation where patients are turned onto their stomachs—to patients in our study and they responded to them as we would expect patients with ARDS to respond."

Importantly, the death rate among critically ill patients with COVID-19 treated this way—16.7%—was not nearly as high as has been reported by other hospitals. Also, over a median follow-up of 34 days, 75.8% of patients who were on ventilators were discharged from the [intensive care unit](#). "Based on this, we recommend that clinicians provide evidence-based ARDS treatments to patients with [respiratory failure](#) due to COVID-19 and await standardized [clinical trials](#) before contemplating novel therapies," said co-lead author Jehan Alladina, MD, an Instructor

in Medicine at Mass General.

More information: David R. Ziehr et al, Respiratory Pathophysiology of Mechanically Ventilated Patients with COVID-19: A Cohort Study, *American Journal of Respiratory and Critical Care Medicine* (2020).
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