

No fewer deaths seen with restricted IV fluid for septic shock

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For adults in the intensive care unit (ICU) with septic shock, intravenous



fluid restriction does not result in fewer deaths at 90 days than standard intravenous fluid therapy, according to a study published online June 17 in the *New England Journal of Medicine* to coincide with the annual Critical Care Reviews Meeting, held from June 15 to 17 in Belfast.

Tine S. Meyhoff, M.D., from Copenhagen University Hospital-Rigshospitalet in Denmark, and colleagues conducted an international, randomized trial involving 1,554 patients with <u>septic shock</u> in the ICU who were randomly assigned to receive either restricted intravenous fluid or standard intravenous fluid therapy (770 and 784 patients, respectively).

Participants in the restrictive fluid group received a median of 1,798 mL of intravenous fluid compared with a median of 3,811 mL in the standard fluid group. The researchers found that death occurred in 42.3 and 42.1 percent of participants in the restrictive-fluid group and standard-fluid group, respectively, at 90 days. In the ICU, serious adverse events occurred at least once in 29.4 and 30.8 percent of patients in the restrictive-fluid and standard-fluid groups, respectively. At 90 days after randomization, the two groups had similar numbers of days alive without life support and days alive and out of the hospital.

"We observed no significant differences in 90-day mortality or <u>serious</u> adverse events among the patients who received restricted fluid therapy and those who received standard therapy," the authors write.

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More information: Tine S. Meyhoff et al, Restriction of Intravenous Fluid in ICU Patients with Septic Shock, *New England Journal of Medicine* (2022). DOI: 10.1056/NEJMoa2202707

Lauralyn A. McIntyre et al, Intravenous Fluids in Septic Shock—More



or Less?, *New England Journal of Medicine* (2022). DOI: 10.1056/NEJMe2206160

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