Scientific Journal of
Pulmonary & Respiratory Medicine

Short Communication

The Efficacy of Mechanical Ventilation in Patients with COVID 19 -

Hamadziripi Ngandu*

George Eliot Hospital NHS Trust, UK

***Address for Correspondence:** Hamadziripi Ngandu, Respiratory Specialist Clinician with special interests in non-invasive ventilation and chronic obstructive pulmonary disease, George Eliot Hospital, UK, Tel: +44-741-124-4263; E-mail: Hamadziripi.Ngandu@geh.nhs.uk

Submitted: 23 March 2020; **Approved:** 28 May 2020; **Published:** 20 June 2020

Cite this article: Ngandu H. The Efficacy of Mechanical Ventilation in Patients with COVID 19. Sci J Pulm Respir Med. 2020;2(1): 007-008.

I have followed with interest, the events around the world, particularly the raising cases of COVID19 in Europe. What struck me most is the number of patients dying following ventilation.

As of the 21st of March 2020, Italy had recorded 4825 deaths as a result of COVID 19. Out of 4825 deaths, the number of those who died after they were put on ventilators is not known, however a large number of these patients would have used a ventilator [1].

In the case of Italy, where huge numbers of deaths were recorded per day, over 400 deaths per day at one point, questions must be asked whether ventilation is effective in patients with COVID 19 or whether it exacerbates the condition leading to death [2]. There are studies which investigated the prognosis of older patients who used mechanical ventilation in intensive care unit (ICU). Anon et al (2013) analysed the prognosis of mechanically ventilated elderly patients in the ICU, reported a significantly higher in-ICU and in-hospital mortality in older patients (≥75 years) than younger patients [3].

Globally, it is also interesting to note that amongst those who died, many of them were aged 70 and above [4]. Furthermore, patients with cardiovascular disease, diabetes, chronic respiratory disease, hypertension and cancer constituted a considerable number of deaths following COVID 19 infection [4]. At the time of writing this report, 10.5% cardiovascular disease, 7.3% diabetes, 6.3% chronic respiratory disease, 6.0% hypertension, 5.6% cancer and 0.9% patients with no pre-existing conditions had died [5]

The purpose of this report is to draw attention to potential and, not yet investigated, causes of so many deaths in people with COVID 19 infection, who had been ventilated as seen in Italy. I believe that not only co-morbidities and age but also the efficacy of ventilation in people with COVID 19 should be investigated.

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