How do we determine successful non-invasive ventilation (NIV) success in children: Carer and Clinician opinion

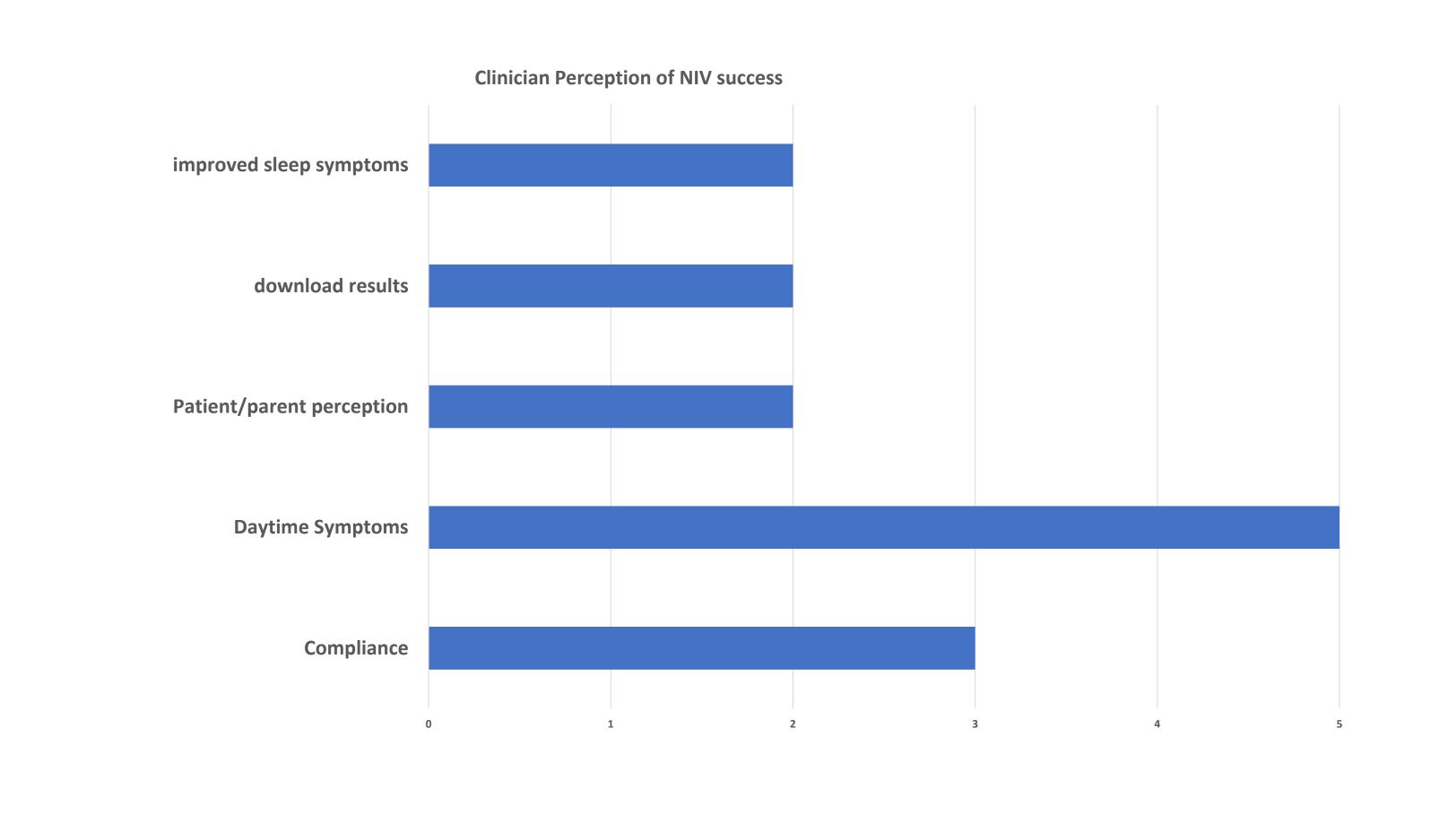
Introduction

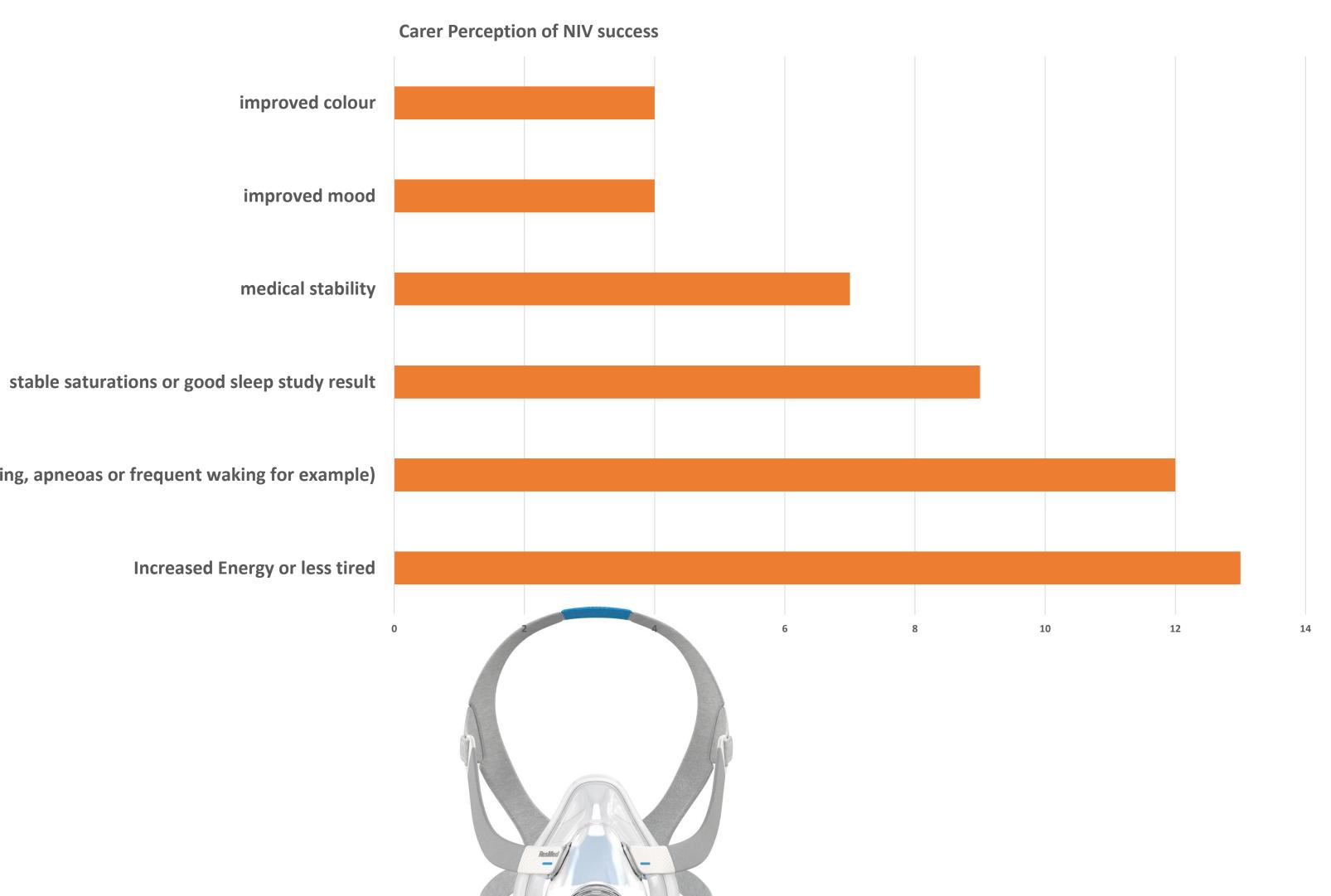
There is no consensus on how to identify successful NIV initiation in children. Parent collaboration is important in paediatric care therefore identifying measures of success for both clinicians and parents is useful when planning care.

The aim of the study was to identify carer / patient and clinician perceived indicators for successful NIV initiation in children.

Methods

An anonymous online survey was sent to all carers with children aged 0-18 years on NIV under the care of a paediatric tertiary centre asking them to identify when they felt successful initiation had been achieved. The responses were then collated, and themes extracted. These themes were presented to the same set of parents, who were asked to rank the themes extracted which would indicate success to them. This process was repeated with clinicians across 2 paediatric tertiary centres.





Results

19 carers responded to both aspects of the survey, and 10 clinicians responded initially with 7 responding to the follow-up. The most popular carer responses were increased energy or less tired (n=13) and reduced sleep symptoms (snoring/apnoea's/frequent waking) (n=12). The most popular clinician response was change in daytime symptoms (n=6) and compliance (n=3).

Conclusions

Carers and clinicians both identify that improved daytime symptoms is the most important indicator of NIV success. Clinicians are more likely to use objective markers to support this such as ventilator compliance. These are themes we will use as outcome measures for future work.



