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RESUMEN

Auler Jr JOC, Bliacheriene F, Miyoshi E, Fernandes RF - Propuestas en Ventilación Mecánica en la Síndrome de Angustia Respiratoria

Justificativa y Objetivos - El objetivo de este artículo es ofrecer al lector un resumen de las normas ya consagradas por la literatura a respecto de la estrategia actual del manejo de la ventilación durante la Síndrome de la Angustia Respiratoria Aguda (SARA). Esto es de fundamental importancia, ya que la ventilación mecánica, como medida terapéutica, ha estado bajo constante revisión, muchos artículos han sido publicados a este respecto.

Contenido - Este trabajo contiene la revisión de 29 artículos y un libro, seleccionados a partir de la pesquisa de palabras-claves realizada en el MEDLINE.

Conclusiones - Mucho se ha publicado a respecto de ventilación en SARA, sin embargo, la tendencia es para una estrategia de protección pulmonar tomando como base el bajo volumen corriente y altos niveles de PEEP. Otras medidas de ayuda serían tomografías computadorizadas seriadas de tórax, ajuste de PaO₂, inhalación de óxido nítrico, posición prono y ECMO (extracorporeal membrane oxygenation).

ERRATUM

Monitor de Profundidade da Hipnose. A Eletroencefalografia Bispectral (Rev Bras Anestesiologia, 2001;51:418-425).

Na Tabela I do artigo referenciado as doses típicas de propofol estão impressas em mg.kg⁻¹.h⁻¹. O correto é µg.kg⁻¹.h⁻¹. Aos leitores, nossas desculpas.

Monitoring the Adequacy of Hipnosis by Bispectral Index (Rev Bras Anestesiologia, 2001;51:418-425).

In Table I of the referred article, typical propofol doses are expressed in mg.kg⁻¹. They should have been expressed in µg.kg⁻¹.h⁻¹. To the readers, our apologies.

Luiz M. Cangiani
Editor Chefe