Using inhaled Nitric Oxide in preterm babies

A Tertiary Unit experience

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Aims: To review the outcome of preterm neonates (<34 weeks) with pulmonary hypertension treated with inhaled Nitric oxide.

Methods: All patients received iNO from March 2009 to August 2013 were recorded on a local data base. Data in each patient including gestation at birth, gender, birth weight, diagnosis and outcome were collected retrospectively from patients medical records.

Results: Number of babies received iNO are 46 (13% less than 28 weeks of gestation), (22% between 28-34 weeks of gestation) and (65% more than 34 weeks).

Development of BPD in surviving babies who received rescue iNO are 100% among babies less than 28 weeks of gestation and 50% among babies with gestation age between 28 and 34 weeks.

Conclusion: Preterm babies less than 28 weeks gestation treated with iNO have significant morbidity and mortality. Cautious approach ia warranted in the absence of robust evidence to support routine off-label use of iNO as an early rescue treatment in extreme preterm babies.

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