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Surfactant therapy of A/H1N1 severe pneumonia and ARDS is a chance for survival

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44 patients with A/H1N1 severe pneumonia and ARDS were followed-up. All the patients had severe respiratory failure, bilateral pneumonia and were diagnosed with A/H1N1 by means of PCR and serological test. 30 patients (group I, PaO2/FiO2<200 mm Hg) had the following treatment: CMV (FiO2=0.8-1, PEEP 14-20 cm, H2O), Oseltamivir (150 mg, 2 times a day, 7-14 days) and surfactant (Surfactant-BL, Russia) at a dose of 3 mg/kg, 2 times a day, during 2-5 days, endobronchially; 14 patients (group II) with less manifestation of respiratory failure did not have CMV, received Oseltamivir (75 mg, 2 times a day, 7-14 days) and Surfactant-BL at a dose of 75 mg, 2 times a day, by inhalation, during 2-3 days. 6-8 hours after the beginning of surfactant therapy, the parameters of oxigenation in group I were improved signifcantly (PaO2/FiO2 increased up to 260-280 mm Hg, FiO2 decreased to 0.4-0.5, PEEP decreased to 8-10 cm H2O). CMV period lasted 10-21 days. 2 patients of 30 died. Group II had fast involution of pneumonia according to clinical and X-ray characteristics. All 14 patients survived. Early use of surfactant was of great importance. It is nesessary to start surfactant therapy during the first or second day of CMV. Inhalation administration is very efficient at early stages of pneumonia development, prevents ARDS and requires less dose of surfactant. Early usage of surfactant therapy in complex treatment of A/H1N1 severe pneumonia and ARDS can help a patient to survive.