

# Surfactant Nebulization to Prevent Early Intubation in Preterm Infants: A Systematic Review and Meta-Analysis

Gaertner VD, Thomann J, Bassler D, Rüegger CM

**Pediatrics, 2021**

Annual Meeting of the Swiss Society of Neonatology

Biel, May 24 2022

# Disclosure

- No relevant competing interests

# Background



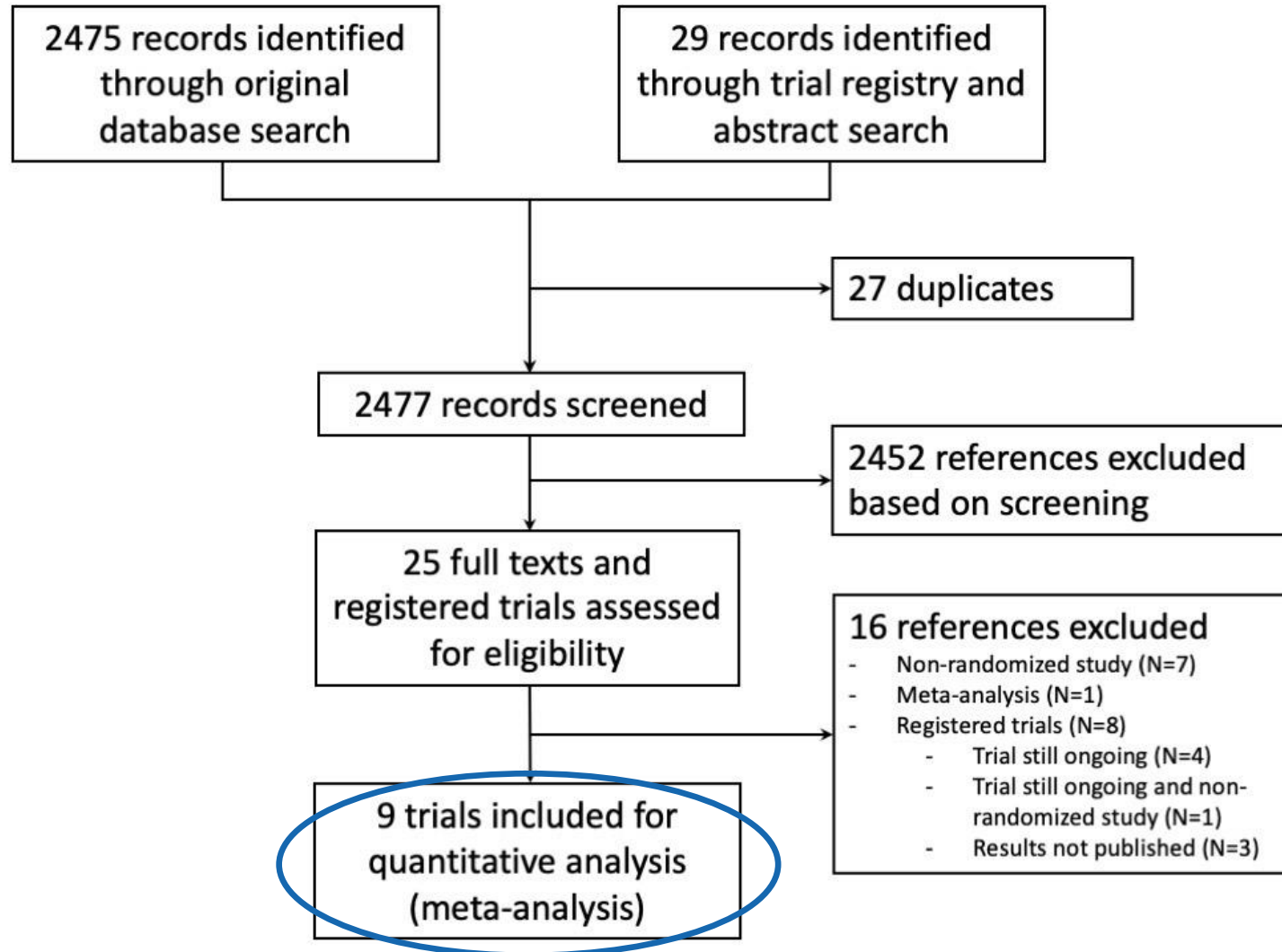
- Objectives:

- Primary: Determine effectiveness of SN in preventing intubation among preterm infants
- Secondary: Assess potential effect modifiers and effects on relevant morbidities

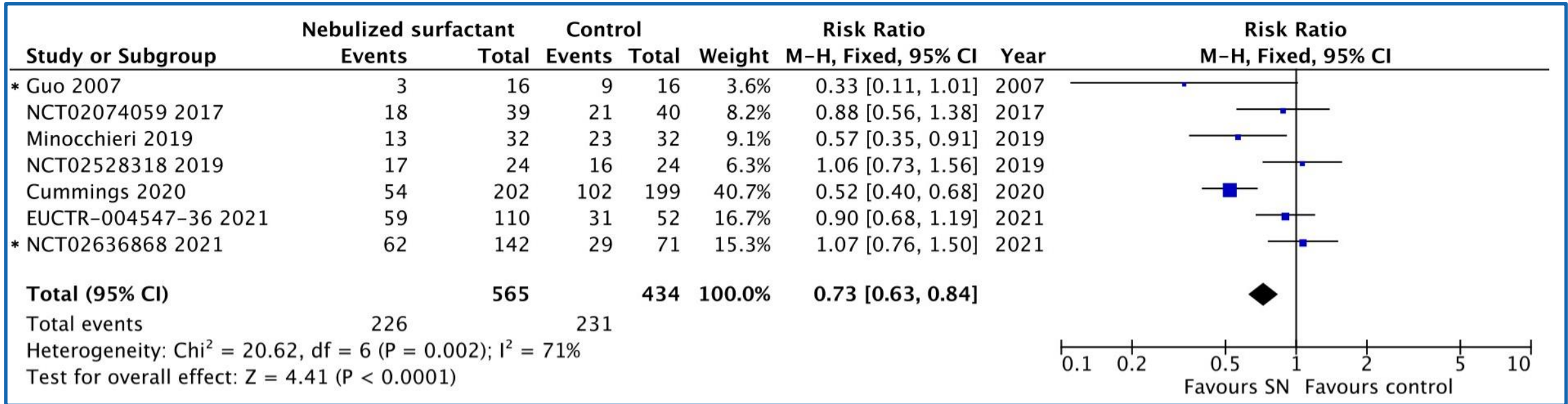
# Methods

- **Data inclusion**
  - Data searched through March 23, 2021
- **RCTs extracted**
  - Population: Preterm infants <37 weeks gestation
  - Intervention: SN
  - Controls: non-invasive respiratory support alone or intratracheal surfactant application
  - Primary Outcome: intubation rate at 72 hours after birth
- **Pre-defined subgroup analysis**
  - Gestational age, type of nebulizer, surfactant type and surfactant dosage

# Flow chart



# Results – Intubation rate



Number needed to treat: 8

## Results II – Effect modifiers

Effect modifier	RR (95% CI)	p
Gestational age		
- <28 weeks	1.12 (0.74 to 1.70)	0.59
- <b>≥28 weeks</b>	<b>0.70 (0.60 to 0.82)</b>	<b>&lt;0.001</b>
Nebulizer type		
- Capillary	1.02 (0.81 to 1.27)	0.90
- <b>Jet nebulizer</b>	<b>0.52 (0.40 to 0.68)</b>	<b>&lt;0.001</b>
- <b>Vibrating membrane</b>	<b>0.78 (0.61 to 1.00)</b>	<b>0.05</b>
Surfactant dose and type		
- <200 mg/kg synthetic	1.02 (0.81 to 1.27)	0.90
- <b>≥200 mg/kg animal-derived</b>	<b>0.62 (0.52 to 0.75)</b>	<b>&lt;0.001</b>

# Results III – Clinical outcomes

Outcome	N infants	Combined effect RR (95% CI)	p
Death	1,000	0.89 (0.30 to 2.65)	0.83
BPD (oxygen need at 36 wks PMA)	998	0.99 (0.74 to 1.32)	0.96
Severe IVH ( $\geq$ grade 3) <sup>34</sup>	994	0.65 (0.29 to 1.44)	0.29
Air leak	1,000	1.03 (0.69 to 1.52)	0.90
Pulmonary hemorrhage	904	0.48 (0.14 to 1.68)	0.25
Sepsis	904	0.90 (0.58 to 1.38)	0.62
Any ROP <sup>35</sup>	423	0.76 (0.37 to 1.54)	0.44
NEC ( $\geq$ stage 2) <sup>36</sup>	968	1.13 (0.49 to 2.63)	0.78



# Discussion/Outlook

- SN reduced the intubation rate in preterm infants
- Higher efficacy for higher GA, specific types of nebulizers and higher dose of animal-derived surfactant
- No difference in relevant neonatal morbidities and mortality
- Quality of evidence was low owing to risk of bias and imprecision
- Data from an RCT on *prophylactic* SN is currently being evaluated

Thank you for your attention!

**USZ** Universitäts  
Spital Zürich

