



Reply to: “Nasal injury and comfort with jet versus bubble continuous positive airway pressure delivery systems in preterm infants with respiratory distress”

R. Elia¹ · E. Nacchiero¹ · M. Vestita¹ · M. Maruccia¹

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Dear Sir,

We read with great interest the recent article entitled “Nasal injury and comfort with jet versus bubble continuous positive airway pressure delivery systems in preterm infants with respiratory distress” by Khan et al. [3]. The authors should be commended for their valuable work as there are few papers in literature investigating on the role of type of nasal interface as determinant of nasal injuries related to continuous positive airway pressure (CPAP) therapy in preterm infants. Whether it is true that there are several surgical techniques to treat columellar defects, the focus of physicians should be addressed to prevention rather than treatment and the choice of the safest device seems to be one key factor.

Inspired by the authors, we would like to express some opinions and offer several suggestions. Considering the high incidence of nasal trauma associated with CPAP treatment (up to 35% [6]), certain precautions should be taken, especially when the initial signs of injury are noticed. We are used to perform daily disinfection and application of topical cream containing hyaluronic acid (HA) sodium salt on pressure ulcers. Moreover, we usually apply a cushion made of gauze pad containing HA sodium between the skin and the mask in order to prevent injuries’ worsening [4, 5]. However, there are several other solutions in terms of prevention but the principles are unchanged, namely, reduce the pressure in the small columellar area and the underlying maxillary spine. Günlemez

et al. [2] reported the therapeutic value of the silicon gel application on the nares in order to avoid or minimize nasal injuries.

In the end, we agree with the authors mentioning the nurse experience as exquisite and paramount to the success of CPAP for the very low birth weight (VLBW) infants with respiratory distress syndrome and as crucial for the early detection of injuries [1].

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Data collection: Elia Rossella, Eleonora Nacchiero

Data analysis and interpretation: Michelangelo Vestita

Drafting the article: Elia Rossella

Critical revision of the article: Eleonora Nacchiero, Michele Maruccia

Final approval of the version to be published: Elia Rossella, Eleonora Nacchiero, Michelangelo Vestita, Michele Maruccia

Compliance with ethical standards

Conflict of interest The authors declare that they do not have conflict of interests. Each author participated sufficiently in the work to take public responsibility for the content and agree to its publication.

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✉ R. Elia
rossellaelia4@gmail.com

¹ Division of Plastic and Reconstructive Surgery, Department of Emergency and Organ Transplantation, University of Bari, 11, Piazza Giulio Cesare, 70124 Bari, Italy

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