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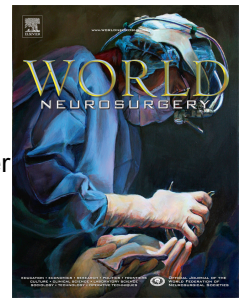

An experience with traumatic brain injury: is early tracheostomy associated with better prognosis?

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An experience with traumatic brain injury: is early tracheostomy associated with better prognosis?

Abstract

Objective

In this study we compared the effects of early tracheostomy (ET) versus late tracheostomy (LT) on traumatic brain injury (TBI) related outcomes and prognosis.

Patients and Methods

Data on 152 TBI patients with a Glasgow coma scale (GCS) of ≤8, admitted to Rajaee hospital, between March 1, 2014 and August 23, 2015, were collected. Rajaee hospital is the main referral trauma center in southern Iran and is affiliated to Shiraz University of Medical Sciences. Patients who had tracheostomy before or at the sixth day of their admission were considered as ET and those who had tracheostomy after the sixth day of admission were considered as LT.

Results

Patients with ET, had a significantly lower hospital stay (46.4 vs. 38.6 days; p=0.048) and ICU stay (34.9 vs. 26.7 days; p=0.003). Mortality rates were not significantly different between the two groups (p>0.99). Although not statistically significant, favorable outcomes [Glasgow outcome scale (GOSE)>4] were higher and ventilator associated pneumonia rates were lower among the ET group (p=0.346 and p=492, respectively).