What was the aim of this study?
Administration of noninvasive ventilation (NIV) in patients with acute hypoxemic respiratory failure (AHRF) is debated. The aim of this study was to determine, in patients admitted to the ICU with AHRF, whether Nasal High Flow (NHF) or NIV, as compared with standard oxygen (Std. O₂) therapy alone, could reduce the rate of intubation and improve outcomes.

Method

Randomization

NHF (n=106)
- Minimum 8 hours* for 2 days
- TV 7-10 ml/kg
- PEEP 2-10 cmH₂O
- O₂ 100%
- Non-rebreather mask

Std. O₂ (n=94)
- > 10 L/min* non-rebreather mask

NIV (n=110)
- Minimum 8 hours* for 2 days
- TV 7-10 ml/kg
- PEEP 2-10 cmH₂O
- O₂ 92%

Primary Outcome

Difference in number of patients intubated at day 28 - not found to be statistically significant (p=0.18)

Secondary Outcomes

NHF significantly reduced intensity of respiratory discomfort and dyspnea

Further reading

PubMed Abstract
Full paper

Published in NEJM by Frat et al. 2015.
aka the FLORALI study

Key Points
NHF reduced intubation rate
NHF reduces escalation of care

23 ICUs in France and Belgium