

Evaluation of the response to the prone position in patients awake with COVID-19

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COVID-19 has a high mortality, as patients who progress to intubation have poor results. The prone position in awake patients can reduce discomfort and the rate of ICU stay. To evaluate the acute effects of the types of responses to the prone position in awake patients with COVID-19. Prospective single-center study with 32 patients awake with COVID-19 with supplemental oxygen. The response to the prone position was performed for 30 minutes. After the test, they were instructed to remain in PP daily, according to tolerance. The SpO₂ variables, heart rate, respiratory rate, ROX index and ICU admission rate were recorded. Twenty-five patients (78.1%) responded to PP, 13 (40.6%) had a persistente response and 12 (37.5%) had a transient response. 7 patients (21.9%) did not respond. Patients with persistent and transient responses increased SpO₂ ($p < 0.001$), ROX index ($p = 0.001$ and $p < 0.001$, respectively) and reduced heart rate ($p = 0.01$ and $p = 0.02$, respectively) and respiratory ($p = 0.003$ and $p = 0.001$, respectively), compared to the pre. There was no difference in all variables in patients who did not respond to PP. The ICU admission rate of patients who had persistent, transient or non-responders was 30.8% (4/13), 41.7% (5/12) and 57.1% (4/7), respectively. Patients who responded to PP had reduced heart and respiratory rates, increased ROX index. There was no difference in admission rate.

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