Emergency and Acute Care Journal Club

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Norman Regional Health System





Disclosures

• Still waiting to hit it big

Discuss TXA for Nosebleed

Can we prescribe yoga for headaches?

What about nebulized ketamine?

Is the oral medicine for Covid-19 effective?

Do we need a fluid bolus during RSI?

Objectives

Objectives

Is there a better way for digital blocks?

Can we revisit high flow nasal cannula during intubation?

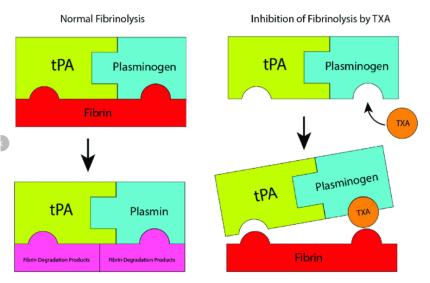
Are we treating back pain appropriately?

How should we alter our treatment for UTI with alkaline urine?

Avoid fire hazards

TXA for Nosebleed

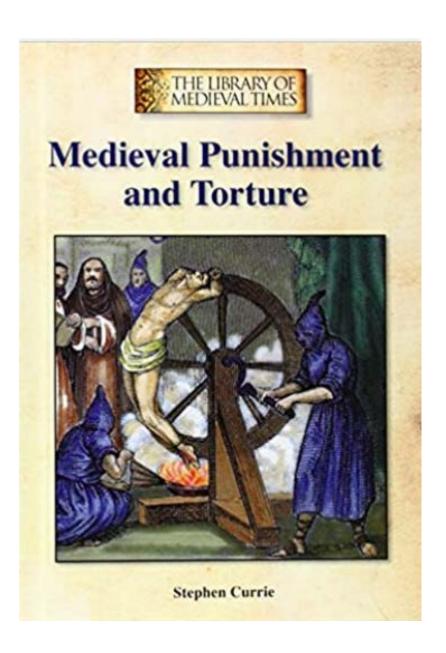
• Janapala RN, Tran QK, Patel J, Mehta E, Pourmand A. Efficacy of topical tranexamic acid in epistaxis: A systematic review and meta-analysis. Am J Emerg Med. 2022 Jan;51:169-175. doi: 10.1016/j.ajem.2021.10.043. Epub 2021 Nov 1. PMID: 34763235.



TXA interaction with plasminogen. Tranexamic Acid(TXA) inhibits fibrinolysis through its binding to plasminogen (Pg). This binding prevents plasminogen from binding to fibrin, which inhibits activation through tPA. https://doi.org/10.1371/journal.pone.0233640.g001



Nasal Packing





Methods

Results



- 63% Less likely to return
- 3.5 X increased likelihood of bleed cessation

Recommendations



Yoga for Headache?

• Anheyer D, Klose P, Lauche R, Saha FJ, Cramer H. Yoga for Treating Headaches: a Systematic Review and Meta-analysis. J Gen Intern Med. 2020 Mar;35(3):846-854. doi: 10.1007/s11606-019-05413-9. Epub 2019 Oct 30. PMID: 31667736; PMCID: PMC7080891.



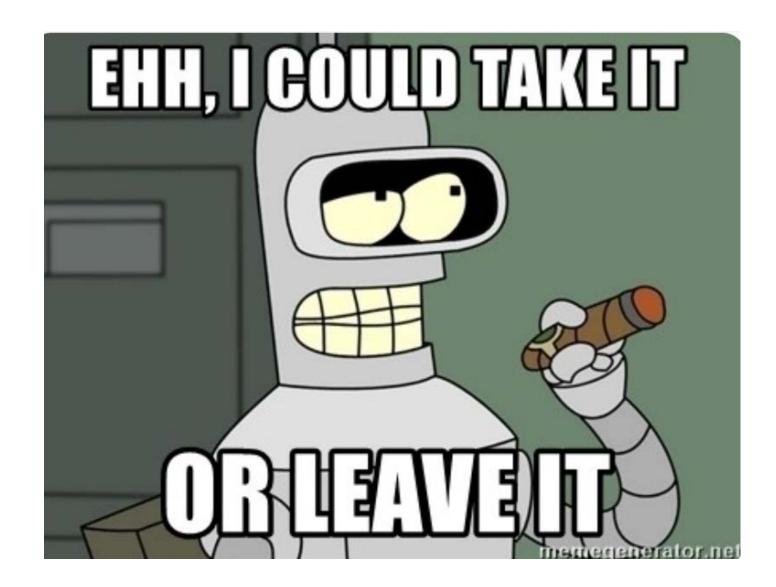
Methods





Results

Recommendations



Nebulized Ketamine

• Dove D, Fassassi C, Davis A, Drapkin J, Butt M, Hossain R, Kabariti S, Likourezos A, Gohel A, Favale P, Silver M, Marshall J, Motov S. Comparison of Nebulized Ketamine at Three Different Dosing Regimens for Treating Painful Conditions in the Emergency Department: A Prospective, Randomized, Double-Blind Clinical Trial. Ann Emerg Med. 2021 Dec;78(6):779-787. doi: 10.1016/j.annemergmed.2021.04.031. Epub 2021 Jul 3. PMID: 34226073.



Methods



Results

Time (mins)	.75 mg/kg	1.0 mg/kg	1.5 mg/kg
Zero	8.7	8.6	8.7
30	5.8	5.2	6
60	4.7	4.4	4.6
90	4	4.4	3.7
120	3.7	3.4	3.6

Recommendations

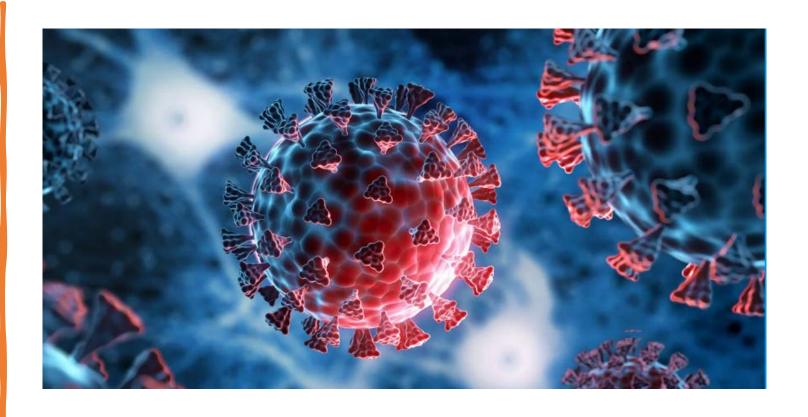


Does Paxlovid Work?

 Najjar-Debbiny R, Gronich N, Weber G, Khoury J, Amar M, Stein N, Goldstein LH, Saliba W. Effectiveness of Paxlovid in Reducing Severe COVID-19 and Mortality in High Risk Patients. Clin Infect Dis. 2022 Jun 2:ciac443. doi: 10.1093/cid/ciac443. Epub ahead of print. PMID: 35653428; PMCID: PMC9214014.



Methods



Results

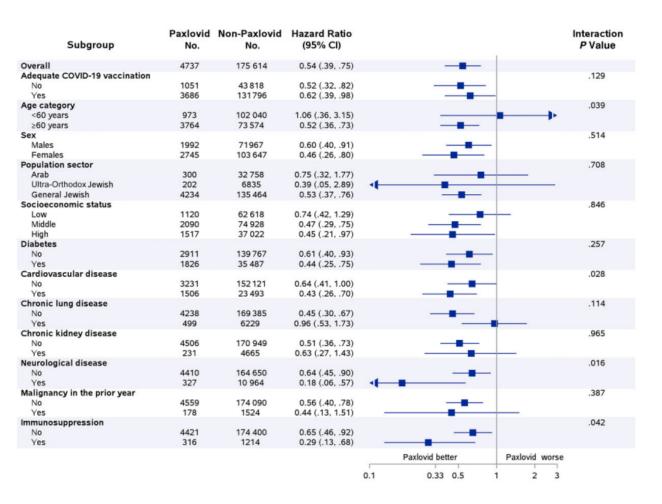


Figure 3. The effectiveness of Paxlovid in reducing the risk of severe coronavirus disease 2019 or mortality by subgroups of selected sociodemographic and clinical variables. *Selection of examined subgroups was based on variables that were retained in the multivariable Cox hazard regression analysis of the overall effect (Table 2). Abbreviations: CI, confidence interval; COVID-19, coronavirus disease 2019.

<u>Test-to-Treat</u>* can help you get tested for COVID-19 and, if appropriate, receive treatment all in the same location.

(📞 1-800-232-0

Healthcare Provider Website

*This link will take you to a website that is owned and operated by HHS. Pfizer is not responsible for the content or services of this site.

Pfizer

Authorized Use

The FDA has authorized the emergency use of PAXLOVID, an investigational medicine, for the treatment of mild-to-moderate COVID-19 in adults and children (12 years of age and older weighing at least 88 pounds [40 kg]) with a positive test for the virus that causes COVID-19, and who are at high risk for progression to severe COVID-19, including hospitalization or death, under an EUA.

FDA EUA Letter

Fact Sheets V

PAXLOVID is investigational because it is still being studied. There is limited information about the safety and effectiveness of using PAXLOVID to treat people with mild-to-moderate COVID-19.

moderate CO

CoV-2 viral testing, and who are at high risk for progression to severe COVID-19, including hospitalization or death

AUTHORIZED USE

The FDA has authorized the emergency use of PAXLOVID, an investigational

IMPORTANT SAFETY INFORMATION

Before taking PAXLOVID, tell your healthcare provider if you:

Have any allergies

stions

Resources

[USA, En]

i-tò-

Expand +

direct SARS-

Do not take PAXLOVID if:

- You are allergic to nirmatrelvir, ritonavir, or any of the ingredients in PAXLOVID.
- You are taking any of the following medicines:
 - Alfuzosin
 - · Pethidine, propoxyphene
 - Ranolazine
 - Amiodarone, dronedarone, flecainide, propafenone, quinidine
 - Colchicine
 - · Lurasidone, pimozide, clozapine
 - · Dihydroergotamine, ergotamine, methylergonovine
 - Lovastatin, simvastatin
 - Sildenafil (Revatio[®]) for pulmonary arterial hypertension (PAH)
 - · Triazolam, oral midazolam
 - Apalutamide
 - · Carbamazepine, phenobarbital, phenytoin
 - Rifampin
 - St. John's Wort (hypericum perforatum)

Morning Dose

ritonavir tablet (100 mg)

nirmatrelvir tablet (150 mg)



nirmatrelvir tablet (150 mg)

Take 3 tablets at the same time.

Evening Dose

ritonavir tablet (100 mg)

nirmatrelvir tablet (150 mg)



nirmatrelvir tablet (150 mg)

Take 3 tablets at the same time.

MAYBE

Recommendations

PrePARE Trial

• Janz DR, Casey JD, Semler MW, Russell DW, Dargin J, Vonderhaar DJ, Dischert KM, West JR, Stempek S, Wozniak J, Caputo N, Heideman BE, Zouk AN, Gulati S, Stigler WS, Bentov I, Joffe AM, Rice TW; PrePARE Investigators; Pragmatic Critical Care Research Group. Effect of a fluid bolus on cardiovascular collapse among critically ill adults undergoing tracheal intubation (PrePARE): a randomised controlled trial. Lancet Respir Med. 2019 Dec;7(12):1039-1047. doi: 10.1016/S2213-2600(19)30246-2. Epub 2019 Oct 1. PMID: 31585796; PMCID: PMC8852295.



Methods



Results

	Fluids	No fluids
N	168	169
Collapse	33 (20%)	31 (18%)
No collapse	135 (80%)	138 (82%)



Recommendation



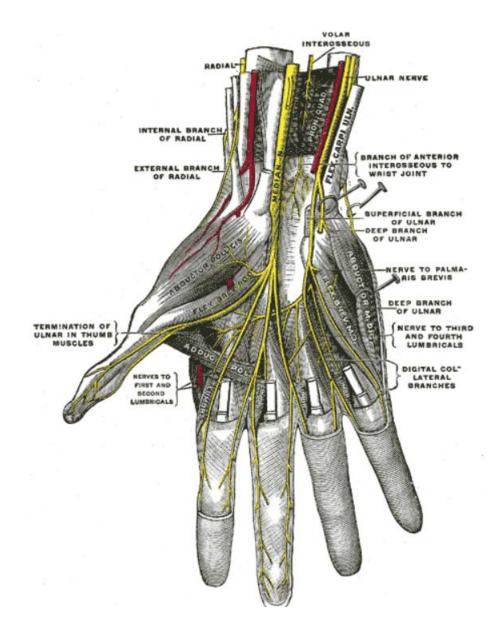




Digital Blocks: A Better Way?

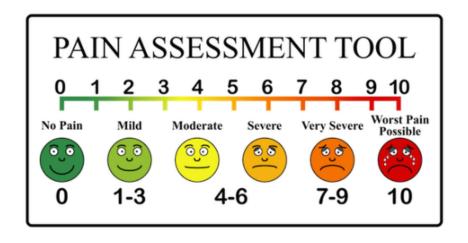
• Selvi F, Bedel C, Akçimen M. Evaluation of vapocoolant spray effect on pain reduction during digital nerve block: A randomized clinical trial. Am J Emerg Med. 2021 Dec;50:260-263. doi: 10.1016/j.ajem.2021.08.001. Epub 2021 Aug 6. PMID: 34418716.

Methods



Results

	Control	Intervention 1	Intervention 2
Pre procedure	7.54	6.96	6.38
Penetration	6.34	5.86	2.34
Injection	6.44	1.9	1.84



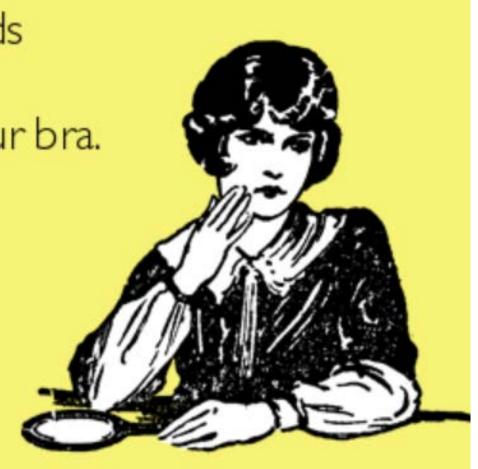
Recommendation

When life hands you lemons, tuck 'em in your bra.

Can't hurt.

Might help.





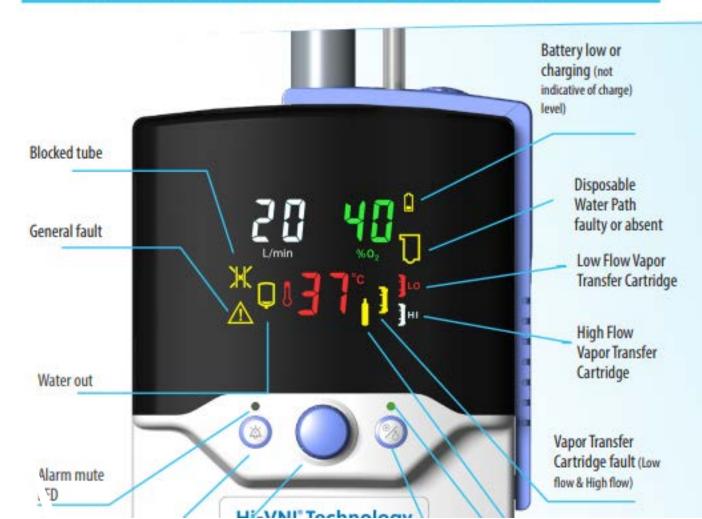
High flow NC during intubation?

• Chua MT, Khan FA, Ng WM, Lu Q, Low MJW, Yau YW, Punyadasa A, Kuan WS. Pre- and Apnoeic high flow oxygenation for RApid sequence intubation in The Emergency department (Pre-AeRATE): study protocol for a multicentre, randomised controlled trial. Trials. 2019 Apr 4;20(1):195. doi: 10.1186/s13063-019-3305-8. PMID: 30947740; PMCID: PMC6449991.

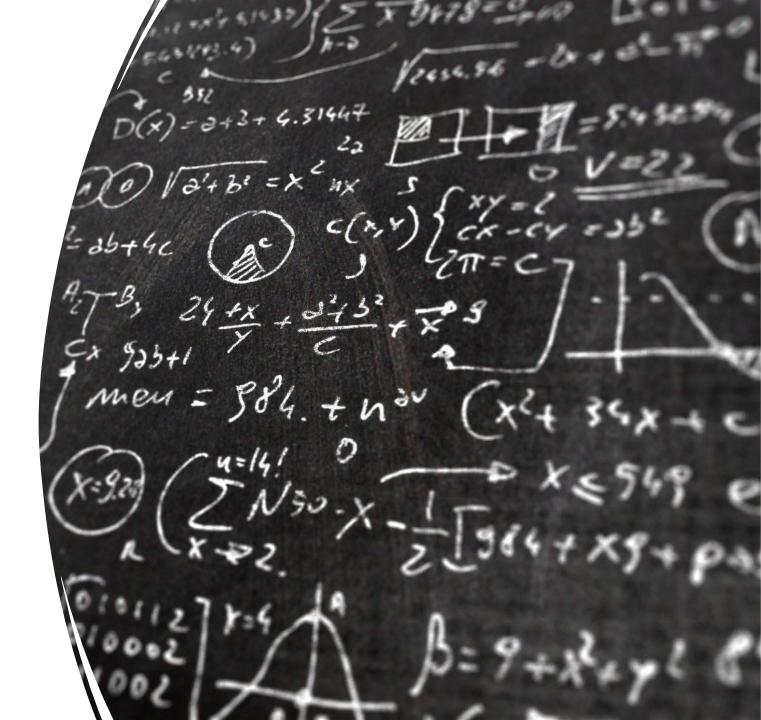
Hi-VNI® Technology

PRECISION FLOW Hi-VNI™

QUICK REFERENCE GUIDE



Methods



Results



Recommendations



Back Pain and Muscle Relaxers

• Abril L, Zamora C, Cordero M, Williams AR, Friedman BW. The Relative Efficacy of Seven Skeletal Muscle Relaxants. An Analysis of Data From Randomized Studies. J Emerg Med. 2022 Apr;62(4):455-461. doi: 10.1016/j.jemermed.2021.09.025. Epub 2022 Jan 20. PMID: 35067395.



Methods



RMDQ Score

_ROLAND-MORRIS ACUTE LOW BACK PAIN **DISABILITY QUESTIONNAIRE**

Please Read: When your back hurts, you may find it difficult to do some of the things you normally do.

This list contains some sentences that people have used to describe themselves when they have back pain. When you read them you may find that some stand out because they describe you today.

As you read the list, think of yourself today. Mark the bubble next to any sentence that describes you today. If the sentence does not describe you, then leave the bubble blank and go on to the next one.

Remember, only mark the sentence if you are sure that it describes you today.

> Please use a No. 2 pencil to fill in your answers. Fill in bubbles completely as indicated here:
> Erase changes cleanly. Do not fold this form.



MO	DAY	YEAR	1)R	#			PΑ	TIE	N	TN	IU.	MB	E	3
80	- 6	- 6	65	05	6	•	6	9	9	85	6	0	65	9	k
00	0	00	0	0	Θ	Θ	Θ	Φ	Θ	0	0	0	0	0	k
00	0	00	0	0	Ø	Θ	0	Ø	Ø	0	0	0	0	0	k
00	0	00	0	0	Φ	0	Φ	0	0	0	0	Θ	θ	Ф	k
00	0	00	0	0	Ф	Φ	Ф	Θ	Θ	Θ	Θ	Ф	Θ	0	k
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	00	00	(3)	0	Ф	Θ	Φ	6	Θ	0	Θ	0	0	Φ	k
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	90	00	0	Φ	Φ	Ø	Φ	Ø	Θ	Θ	Θ	0	0	0	ķ
		0	0	œ	Ø	02	Œ.	Œ	Œ	CD)	Ф	(2)	0	0	k

- t stay at home most of the time because of my back.
- o I change position frequently to try and get my back comfortable.
- I walk more slowly than usual because of my back.
- Because of my back I am not doing any of the jobs that I usually do around the house.
- Because of my back, I use a handrail to get upstairs.
- Because of my back, Hie down to rest more often.
- Because of my back, I have to hold on to something to get out of any easy chair.
- Because of my back, I try to get other people to do things for me.
- p I get dressed more slowly than usual because of my
- only stand up for short periods of time because of my
- Because of my back, I try not to bend or kneel down.
- on I find it difficult to get out of a chair because of my

- m My back is painful almost all the time.
- I find it difficult to turn over in bed because of my back.
- My appetite is not very good because of my back.
- I have trouble putting on my socks (or stockings) because of the pain in my back.
- I only walk short distances because of my back pain.
- m I sleep less well because of my back.
- Because of my back pain, I get dressed with help from someone else.
- I sit down for most of the day because of my back.
- t avoid heavy jobs around the house because of my
- Because of my back pain, I am more irritable and bad tempered with people than usual.
- Because of my back, I go upstairs more slowly than
- I stay in bed most of the time because of my back.

Results

Muscle Relaxant	Change in RMDQ	No or Mild Pain	Adverse Reactions
Placebo	10.5	65	16
Baclofen	10.6	67	10
Metaxalone	10.3	63	9
Tizanidine	11.5	68	8
Diazepam	11.1	68	21
Orphenadrine	9.5	67	9
Methocarbamol	8.1	61	19
Cyclobenzaprine	10.1	60	35

Recommendations



Urine pH and UTI

• Sheele JM, Libertin CR, Fink I, Jensen T, Dasalla N, Lyon TD. Alkaline Urine in the Emergency Department Predicts Nitrofurantoin Resistance. J Emerg Med. 2022 Mar;62(3):368-377. doi:

10.1016/j.jemermed.2021.1 0.022. Epub 2022 Jan 6. PMID: 35000812.



Methods



Results

	5-7	8	9
Nitrofurantoin	80.4	69.5	54.6
Cefazolin	80.8	78.5	78.7
Ciprofloxacin	73.7	70.4	63.5
TMP-SMX	77.5	76.1	70.2

Recommendations









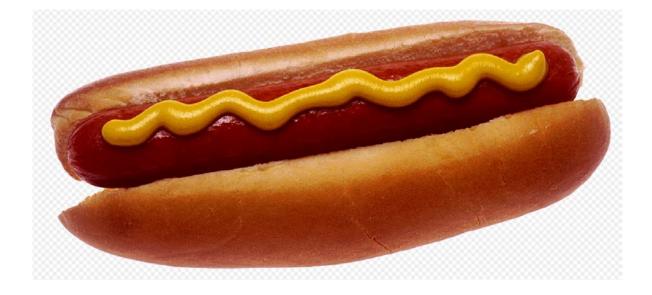
Avoid the Fire

• Blereau C, Radloff S, Grisham J. Up in Flames: The Safety of Electrocautery Trephination of Subungual Hematomas with Acrylic Nails. West J Emerg Med. 2022 Feb 23;23(2):183-185. doi: 10.5811/westjem.2021.10.53567.

PMID: 35302451; PMCID: PMC8967465.

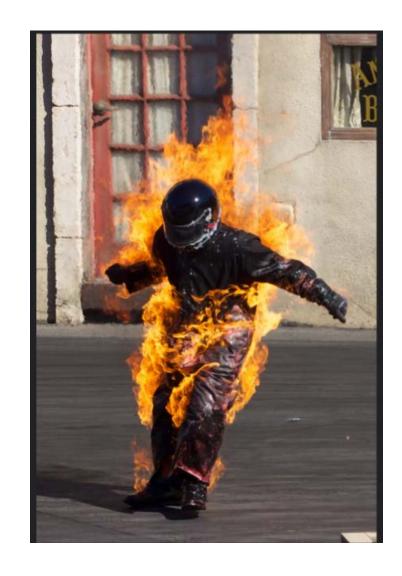
Methods

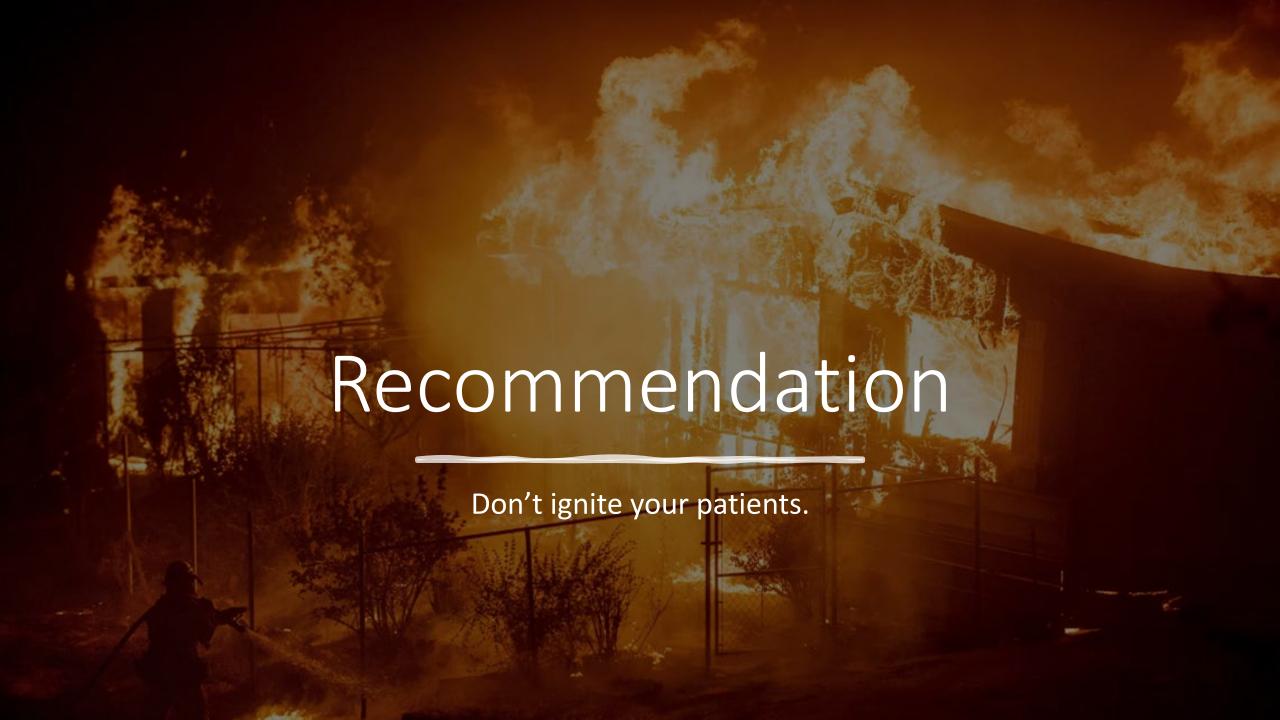




Results

N=200	Ignite	No Ignite
Absolute	83	117
Percentage	41.5	58.5





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THANKS A BUNCH!

