

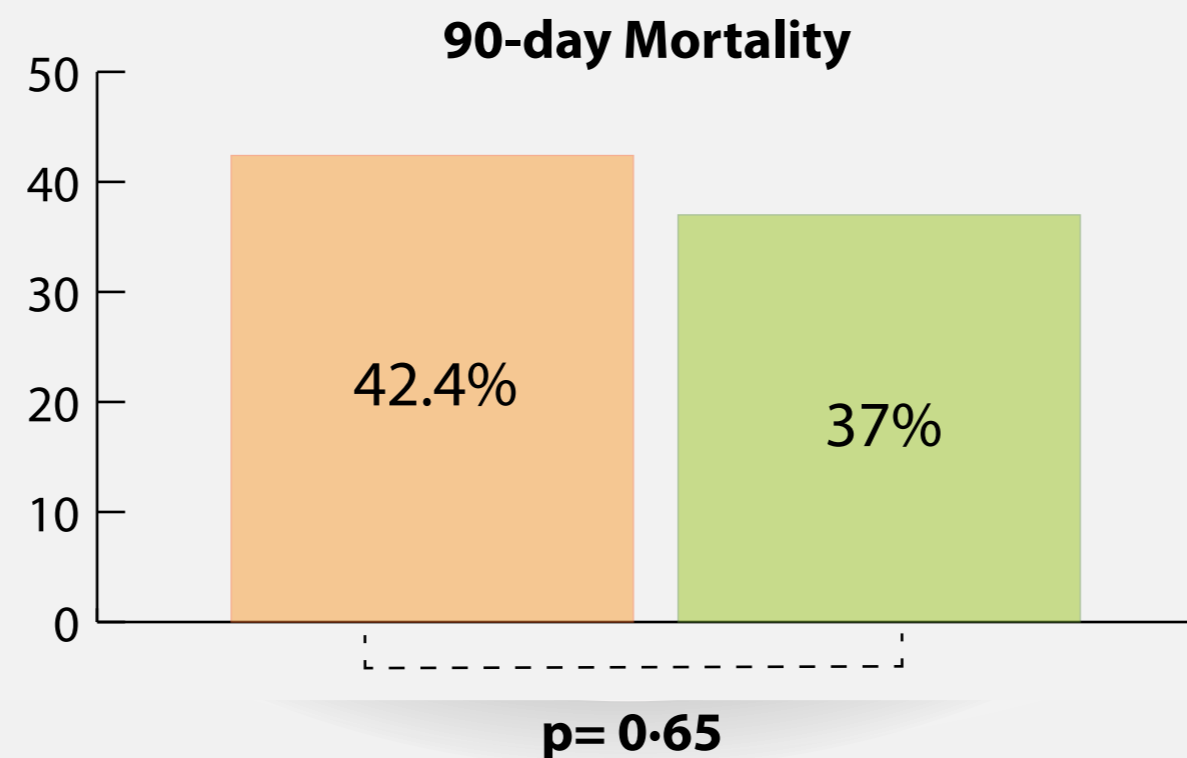
Does a plan of no sedation in critically ill and intubated patients have an effect on mortality compared to a plan of light sedation?

NO SEDATION

Patients did not receive any sedatives except for bolus doses of morphine for analgesia as needed. Patients were awake with the goal to sustain a natural sleep rhythm. If sedatives became necessary, same medications as of light sedation group were given.

LIGHT SEDATION

Continuous infusion of sedatives with a RASS goal of -2 to -3 and daily sedation interruption with the aim of full wakefulness.



CONCLUSION

No significant difference in 90-day mortality with the use of no sedation compared to light sedation strategies. Less cases of major embolic events but more accidental extubations and removal of other equipment.