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Autore	Esquinas Antonio M
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Altri autori (Persone)	FabboAndrea KocFiliz PrymusAgnieszka FarnikMagorzata
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Nota di contenuto	Part I. Neuropsychiatric and Lung Physiology -- Delirium permanence during resolution phase of massive pneumonia in patient with COPD exacerbation -- Pattern of psychology responses in acute and chronic respiratory failure -- Epidemiology of neuropsychiatric disorders in ventilator management -- Part II. Psychiatric Disorders in Respiratory Failure. Key Concepts -- Psychiatric disorders in respiratory failure. Key concepts -- Concept of “vulnerable to stress” critical illness- psychological stress and susceptibility in noninvasive ventilator support -- Evaluation of susceptibility to psychological stress and

psychopathology in noninvasive ventilator support -- Part III. Acute psychiatric disorders that may develop during noninvasive ventilator support. Acute and chronic conditions -- Measurements and scores: Hospital Anxiety and Depression Scale (HADS) -- Anxiety - Hyperventilation Syndrome -- Depression -- Post-traumatic stress disorder -- Delirium -- Part IV. Diagnosis of Psychiatric Disorders In Respiratory Failure-Non Invasive Ventilator Support -- Identified risk factors for prolonged psychiatric- active or passive stressors (socioeconomic status; prior psychiatric morbidity) -- Part V. Noninvasive Ventilation: Acute Respiratory Failure -- Psychopathological problems in Chronic obstructive pulmonary disease (COPD) -- Noninvasive Ventilation in Asthma -- Neuromuscular disorders -- Acute Respiratory failure in Pneumonia -- Acute neurologic disorders -- Noninvasive ventilation in pandemic, bioterrorism high risk infections -- Part VI. Noninvasive Ventilation: Chronic Respiratory Failure -- Long term ventilator depend patients-NIV -- Sleep breathing disorders -- Psychotic disorders-NIV -- Neurodegenerative disorders / Dementia -- Chronic neurologic disorders -- Part VII. Outcome, Quality of Life, Palliative Care -- Risk factors for prolonged psychiatric morbidity during noninvasive ventilator support -- Neurology and psychiatric sequelae of intensive care: impact on quality of life -- Neurology and psychiatric disorders- Long-term implications for health care system -- Neurocognitive and emotional morbidity and quality of life -- Psychological, social and economic impacts -- Neurology and psychiatric cognitive recovery -- Noninvasive ventilation and palliative applications. Do not endotracheal intubation in neurology and psychiatry -- Neuropsychiatric disorders in Pulmonary rehabilitation -- Part VIII. Treatment-Interventions and Prevention -- Physical activity / emotional response in noninvasive ventilator users -- New technologies directed on physical activity. Tele-health – tele-interventions-neurology and psychiatry -- Prevention-Tools for neurology and psychiatric disorders in noninvasive ventilation (delirium prevention/management-sleep promotion) -- Part IX. Further Research -- The role of neurocognitive disorders in clinical ageism: a key factor for NIV? -- Neuropsychiatric disorders during noninvasive ventilation.

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## Sommario/riassunto

In different sections of this book the relationships between the patterns of psychological response in acute and chronic respiratory failure, as well as the epidemiology of neuropsychiatric disorders in ventilator management, are collected and analyzed. Main concepts such as “vulnerability to stress”, critical illness-psychological stress and susceptibility that may develop during NIV support, as well as the diagnosis of neuropsychiatric disorders in respiratory failure are also summarized. A section is devoted to the most frequent indications of NIV, also including a special use of NIV in pandemic and high-risk infections, as well as in several other conditions such as acute and chronic respiratory failures and neurological disorders. A summary of practical approaches for treatment and prevention in neurologic and psychiatric disorders during noninvasive mechanical ventilation, as well as the perspective in terms of outcomes, quality-of-life, palliative care is also given. The book is intended for all those healthcare professionals treating patients suffering from neurological or psychiatric disorders and who develop acute or chronic respiratory failure. Neurologists, psychiatrists, pulmonary critical care professionals, geriatricians, internists and psychologists will find in the book a valuable guide for their everyday clinical practice.

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