Objective:
To determine the safety and efficacy of NCPAP delivery via nasal masks, compared to binasal prongs, among preterm infants receiving NCPAP.

Patient:
Neonates in 26-34 week Gestation and/or <1500 gram birthweight requiring NCPAP for Respiratory distress in Delivery room after routine resuscitation and Post Extubation Respiratory Support

Design:
Proportion of infants requiring intubation and mechanical ventilation within 72h of initiation of NCPAP and the proportion of infants with skin injury resulting from the NCPAP interface.

Key Message:
- Nasal mask as preferred interface for CPAP delivery offers clinical advantage in reducing CPAP failure, surfactant need and moderate to severe bronchopulmonary dysplasia.
- Safety profile is also better than prongs with decrease incidence of nasal septum injury in mask usage.

Reference