SUPPLEMENTARY MATERIAL

Non-invasive ventilation in COVID-19-related acute hypoxemic respiratory failure: a narrative review

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Aspect	Weerakkody et al. [26]	SIMEU [27]	Guidelines Panel	[49,50] [49,50]	Scala et al. [48]
Study Type	Meta-analysis (2 RCTs + 83 observational studies)	Clinical position statement	Expert consensus guideline	Observational studies	Clinical algorithm recommendation for ARF management
Main NIRS Modalities Evaluated	HFNC, CPAP, BiPAP	HFNC, CPAP, NIPPV	HFNC, NIV, Mechanical Ventilation	STP/F, S/F ratio	HFNC, CPAP, NIV
Initial Oxygen Therapy Criteria	Start with standard O ₂ therapy	SpO ₂ < 94%; FiO ₂ titrated per range	SpO ₂ < 92%	SpO ₂ < 92%	Start COT if SpO ₂ < 92%; reevaluate within 4 hrs
Escalation Criteria for NIRS	Increased WOB, ↓ PaO ₂ /FiO ₂ , ↓ ROX index	SpO ₂ < 92% after NRB 15 L/min or P/F 200–300	RR > 30, P/F < 300	P/F < 300 or SpO ₂ < 93%	P/F < 300 and/or RR > 30 → HFNC; P/F < 200 → CPAP; P/F < 100 or RR > 30 w/ distress → NIV
Preferred NIRS Modalities Based on Condition	BiPAP if hypercapnic; CPAP/HFNC otherwise	HFNC preferred before NIV; NIPPV in COPD/acidosis	HFNC first-line; NIV if HFNC fails	S/F or STP/F used to stratify severity	HFNC (30–60 L/min); CPAP (PEEP 10); NIV (PEEP 12–16 + PS to get Vt 4–6 ml/kg/PBW)
Monitoring Parameters	Flowchart guided, clinical signs	ABG, FiO ₂ , Vt, SpO ₂ , RR	Hourly ABG, RR, SpO ₂ , FiO ₂	S/F ratio, STP/F ratio, lab and radiologic biomarkers	Reassess: HFNC every 2, 6, 12 hrs; CPAP/NIV hourly
Failure Indicators	Hypoxemia, poor response	Vt > 9 ml/kg PBW, P/F < 150, SpO ₂ < 94%, RR > 25, intolerance	P/F < 150, SAPS II > 35, APACHE II > 17	Persistent low S/F, poor clinical trend	Worsening SpO_2 or $\uparrow PaCO_2$, arrest, hemodynamic instability, NIRS intolerance \rightarrow switch to invasive ventilation
HFNC vs. NIV Recommendations	HFNC + mask NIV ↓ intubation/mortality	HFNC before NIV; NIV in COPD or respiratory acidosis	HFNC preferred for initial therapy	HFNC for early ARF, S/F 200; STP/F used for mortality prediction	Use HFNC first if P/F > 200; CPAP if P/F 100–200; NIV if P/F < 100
Use of P/F and S/F Ratios	Not emphasized	S/F used for monitoring	Used in stratification	S/F correlates with severity; STP/F more physiologically accurate	P/F used for stepwise support; no S/F or STP/F specifically discussed
Role of STP/F Ratio	Not addressed	Not discussed	Not discussed	STP/F superior to P/F in mortality prediction	Not discussed

Supplementary Table 1. A schematic and comparative table of clinical algorithms and guidelines cited.

RCT, randomized controlled trial; ARF, acute respiratory failure; HFNC, high flow nasal cannula; CPAP, continuous positive airway pressure; BiPAP, bilevel positive airway pressure; NIPPV, noninvasive positive pressure ventilation; NIV, noninvasive venitlation; COT, continuous oxygen therapy; WOB, work of breathing; NRB, non-rebreather mask; RR, respiratory rate.



PUBBLICATION	PATIENT POPULATION	TREATMENT	INTUBATION RATE	MORTALITY RATE
Bellani et al. [58], 2021	COVID-19 AHRF Median PaO2/FiO2 172 mmHg	NIV + CPAP n=798 215 [27%] patients with limitations of treatment Helmet was used for 617 patients, face mask for 248 Noninvasive respiratory support initiated 1 day after hospital admission PEEP was 10.8 cmH20, ranging from 2 to 20	Noninvasive respiratory support failure 38% [95% Cl 34 to 41] in the overall cohort Noninvasive respiratory support failure 27% [23 to 30] in patients with no limitations of treatment cohort Noninvasive respiratory support failure 67% [61 to 73] in patients with limitations of treatment cohort	Overall mortality was 25% [95% Cl 22 to 28]
Bertaina et al. [52], 2021	COVID-19 AHRF 51% of patients had SpO2<92% on room air	NIV n= 390	NIV failure 44% [95% CI 40 to 49] Received ETI 16% [95% CI 13 to 20]	Overall cohort 38% [95% Cl 33 to 43] Among intubated patients 58% [95% Cl 46 to 70%]
Burns et al. [62], 2020	COVID-19 AHRF SpO2<94% in Venturi Mask 40%	CPAP n=23 BIPAP n=5 BIPAP settings: max PEEP=10.2 cmH2O max Pinsp=22.4 cmH2O CPAP settings: Max PEEP=12.7 cmH2O	Not reported	BIPAP 40% [95% CI 12 to 77] CPAP 52% [33 to 71]
Duca et al. [53], 2020	COVID-19 AHRF CPAP Median PaO2/FiO2 131 mmHg NIV Median PaO2/FiO2 87 mmHg IMV at arrival Median PaO2/FiO2 76 mmHg	CPAP n=71 Helmet CPAP, PEEP=15cmH2O NIV n=7 NIV, PEEP=16 cmH2O IMV on arrival=7 IMV at arrival, PEEP=18 cmH2O	CPAP intubation rate 37% [95% CI 26 to 48] NIV intubation rate 0% [95% CI 0 to 35] CPAP failure 92% [95% CI 83 to 96] NIV failure 57% [95% CI 25 to 84	CPAP 76% [95% Cl 65 to 84] NIV 57% [95% Cl 25 to 84] IMV at arrival 100% [95% Cl 65 to 100]
Faraone et al. [54], 2020	COVID-19 AHRF Median PaO2/FiO2 130 mmHg 25 [50%] patients had patients with limitations of treatment	NIV n=25 CPAP n=25 Interface: full face or oronasal mask PEEP started at 5 cmH2O, up to 12 cmH2O IPAP set at 15cmH2O, up to 20–25 cmH2O	Patients with no limitations of treatment: 36% [95% Cl 20 to 55] CPAP failure 44% [95% Cl 27 to 63] NIV failure 68% [95% Cl 48 to 83]	Patients with limitations of treatment 88% [95% Cl 70 to 96] Patients with no limitations of treatment 12% [95% Cl 4 to 30]

Supplementary Table 2. Clinical trials of non-invasive ventilation in COVID-19-related acute respiratory failure.



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Franco et al. [68],	COVID-19 AHRF	HFNO n=163	Recieved IMV: HFNO 29% [95% Cl 24 to	30-day mortality:
2020	Median PaO/FiO2 138	CPAP n=330	36]	HFNO 16% [95% CI 11
	mmHg	PEEP 10.2 cmH2O	CPAP 25% [95% CI 20 to 30]	to 22]
	0	Helmet 149 [99%]	NIV 28% [95% CI 22 to 35]	CPAP 30% [95% CI 26 to
		Face mask 2 [1%]	HENO Failure 38% [CI 31 to 47]	351
		NIV n=177	CPAP Failure 47% [95% CI 42 to 53]	NIV 31% [95% CI 24 to
		PEEP 9.5 cmH2O	NIV Failure 53% [95% CI 46 to 60]	38]
		Pressure Support 17.3		1
		cmH2O		
		Helmet 15		
		Face mask 57		
Fu et al. [46], 2021	COVID-19 AHRF	NIV as initial therapy	NIV as initial therapy 23% [95% CI 10 to	NIV initial therapy 5%
	NIV as initial therapy	N=22	43]	[95% Cl 8 to 22]
	Median PaO2/FiO2	NIV as rescue therapy	NIV as rescue therapy 65% [95% CI 41 to	NIV as rescue therapy
	174.4 mmHg	N=17	83]	12% [95% Cl 3 to 34]
	NIV as rescue	PEEP in NIV success: 6		
	therapy	PEEP in NIV failure: 6		
	Median PaO2/	Pressure Support in NIV		
	FiO2 179.27 mmHg	success: 7		
		Pressure Support in NIV		
		failure: 6		
Grieco et al. [78],	COVID-19 AHRF	Helmet NIV n=54	Helmet NIV 30% [95% CI 19 to 43]	HFNO 25% [16 to 38]
2021	NIV PaO2/FiO2 105	Continuous treatment	HFNO 51% [95% CI 38 to 64]	Helmet NIV 24% [95% CI
	mmHg	PEEP 12 cmH2O		15 to 37]
	HFNŎ PaO2/FiO2	Pressure Support 10 cmH2O		
	102 mmhg	HFNO n=55		
Hua et al. [55],	COVID-19 AHRF	SOT n=204	Not reported	SOT 6% [95% CI 4 to 11]
2020		IMV n=113		IMV 92% [95% CI 86 to
		NIV n=152		96]
				NIV 41% [95% CI 33 to
				49]
Liu et al. [76],	COVID-19 AHRF	HFNO n=366	HFNO 56% [95% CI 51 to 61]	HFNO 49% [95% CI 44
2021		NIV n=286	NIV 74% 95% CI [68 to 78]	to 54]
				NIV 62% [95% CI 56 to
				67]
Menzella et al. [56],	COVID-19 AHRF	NIV n=79	ETI rate after the exclusion of patients with	Mortality in the 20
2021	Median PaO2/FiO2 120.1	PEEP: 9.46 cmH2O	limitations of treatment and 2 sudden	intubated patients were
	mmHg	IPAP: 17.7 cmH2O	deaths	43% [95% Cl 25 to
			36% [95% Cl 25 to 48]	63]
			NIV failure in the overall cohort 52%	18 [23%] patients had
			[95% CI	patients with limitations
			41 to 63]	of treatment



				2 [3%] patients died of sudden death
Mukhtar et al. [77], 2020	COVID-19 AHRF	NIV n=39	Need for ETI 23% [13 to 38] NIV failure 31% [95% CI 19 to 46]	26% [15 to 41]
Rose´n et al. [89], 2021	COVID-19 AHRF Standard care n=39 PaO2/FiO2 standard care 115 mmHg] Prone n=36 PaO2/FiO2 prone 115 mmHg	HFNO standard care n=29 HFNO prone n=31 NIV standard care n=27 PEEP 8 cmH20 NIV prone n=21 PEEP 7 cmH20	Standard care group 33% [95% CI 20 to 49] Prone group 33% [95% CI 20 to 50]	Control group 8% [95% Cl 3 to 20] Prone group 17% [95% Cl 8 to 22]
Sivaloganathan et al. [79], 2020	COVID-19 AHRF Worst PaO2/FiO2 ratio: NIV only: 127.5 mmHg NIV + MV: 104.26 mmHg IMV only: 115 mmHg NIV - limitations of treatment: 75 mmHg	NIV only n=31 NIV + MV n=27 IMV only n=21 NIV–limitations of treatment n=24	Patients with no limitations of treatment: 47% [95% Cl 34 to 59]	Patients with no limitations of treatment: 5% [95% Cl 2 to 14] Patients with limitations of treatment: 83% [95% Cl 64 to 93]
Vianello et al. [74], 2020	COVID-19 AHRF Median PaO2/FiO2 108 mmHg	HFNO n=28 Rescue NIV n=9	HFNO failure 32% [95% Cl 18 to 51] Rescue NIV failure 56% [95% Cl 27 to 81] ETI 18% [95% Cl 8 to 36]	11% [95% CI 4 to 27]
Wang et al. [59], 2020	COVID-19 AHRF Median PaO2/FiO2 209 mmHg in success patients Median PaO2/FiO2 142 mmHg in failure patients	HFNO n=17 only IMV n=1 first line NIV n=9 rescue NIV n=7	HFNO failure and rescue NIV 41% [95% Cl 22 to 64] HFNO 12% [95% Cl 3 to 34] First line NIV failure 11% [2 to 42] Rescue NIV failure 29% [8 to 64]	Not reported
Wendel Garcia et al. [75], 2021	COVID-19 AHRF Median PaO2/FiO2 123 mmHg	SOT n=87 HFNO n=87 NIV n=87 MV n=92	SOT 64% [95% CI 53 to 63] HFNO 52% [95% CI 41 to 62] NIV 49% [95% CI 39 to 60]	SOT 18% [95% CI 11 to 27] HFNO 20% [95% CI 13 to 29] NIV 37% [27 to 47

AHRF, acute hypoxemic respiratory failure; NIV, non-invasive ventilation; CPAP, continuous positive airway pressure.

