Using Oxygen Desaturation Index to Predict Respiratory Depression in Post-Surgical Patients Receiving Opioids: A Post-hoc Analysis from the Prediction of Opioid-induced respiratory Depression in patients monitored by capnoGraphY (PRODIGY) study

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Disclosure

A. K. Khanna reports consulting fees from Medtronic, Edwards Lifesciences, and Philips North America.

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Mortality

Morbidity

Opioidinduced respiratory depression

> Length of Stay

Cost

Readmission

Methods: The PRODIGY trial (NCT02811302)

Any respiratory opioid-related adverse event

Inclusion Criteria: adults receiving parenteral opioid therapy on the general care floor



Methods

• Oxygen Desaturation Index 4% (ODI4%):

 4% decrease in saturation from the average blood oxygen saturation in the past 120 seconds, lasting at least 10 seconds (Chung et al. Anesth Analg 2012;114:993-1000)



Time (seconds)

$817 / 1072 (76\%) \ge 1$ episode of ODI4%

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Parameter		95% Wald Cl			
	Odds Ratio	Lower Cl	Upper Cl	p-value	
Length of monitoring (overnight hours)	1.231	1.08	1.403	0.0018	
Geography (United States vs Asia)	1.659	1.18	2.333	0.0036	
Geography (United States vs Europe)	1.11	0.761	1.621	0.5875	
Opioid Naive	1.421	0.988	2.043	0.058	
Age (≥60 to <70 vs <60)	2.311	1.694	3.151	<0.0001	
Age (≥70 to <80 vs <60)	3.844	2.605	5.673	<0.0001	
Age (≥80 vs <60)	6.386	2.801	14.562	<0.0001	
Male Sex	2.095	1.593	2.753	<0.0001	
Sleep Disordered Breathing	1.531	0.994	2.36	0.0535	
Chronic Heart Failure	1.823	0.762	4.359	0.1771	
ODI _{4%} (<15 vs ≥15) episodes/hr	4.71	1.934	11.469	0.0006	
Hosmer-Lemeshow p-value		0.71			
AUC (95% Wald Cl)		0.7226 (0.6914-0.7538)			

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