

WEB TABLE I: USE OF KETAMINE FOR ACUTE ASTHMA IN CHILDREN

<i>Study</i>	<i>Type of study</i>	<i>No. of cases</i>	<i>Age</i>	<i>Clinical profile</i>	<i>Dose of ketamine</i>	<i>Ventilation</i>	<i>Result</i>
Betts, <i>et al</i> [3]	Case report	1	5 yr	Acute severe asthma	4.8 mg/kg IM f/b* 0.6 mg/kg IV 4 doses every 15 min	no	Improved
Petrillo, <i>et al</i> [4]	Observational study	10	8 (5-16) yr	Status asthmaticus unresponsive to standard therapy	bolus of 1 mg/kg, f/b infusion at 0.75 mg/kg/h	no	Improved asthma severity indices
Allen, <i>et al</i> [5]	RCT†	33	5.7±4.3	Asthma exacerbation with ‡PIS >8 after 1 hr of standard therapy	bolus of 0.2 mg/kg, 0.5 f/b 2 hr infusion at mg/kg/h	no	No improvement in PIS‡ as compared to standard therapy
Denmark, <i>et al</i> [6]	Case report	2	9 yr, 4 yr	Severe acute asthma exacerbation	bolus of 2 mg/kg, f/b infusion at 2-3 mg/kg/h	no	Improvement, ventilation prevented
Rock, <i>et al</i> [7]	Case report	2		Respiratory failure due to status asthmaticus	1.0 to 2.5 mg/kg/h	yes	Improved
Nehama, <i>et al</i> [8]	Case report	1	8 m§	Respiratory failure due to status asthmaticus		yes	Improved
Youssef-Ahmed, <i>et al</i> [9]	Retrospective chart review	17	6±5.7 y (5 m-17 y)	Severe bronchospasm due to status asthmaticus (11), bronchiolitis (4), bacterial pneumonia (2)	bolus of 2 mg/kg, f/b infusion at 32±10 (20-60) µg/kg/min	yes	improved gas exchange and dynamic compliance
Index case	Case report	1	2 m	Refractory wheezing	bolus of 1 mg/kg, f/b infusion at 10-15 µg/kg/min	no	Improved.

*f/b-followed by, †RCT-Randomised control trial, ‡PIS-pulmonary index score, §m-months.