Special Issue

Diagnosis and Management of Newborn Respiratory Distress Syndrome

Message from the Guest Editor

The neonatal survival of preterm babies is still improving thanks to modern technologies and newly targeted therapy approaches to pulmonary immaturity and surfactant deficiency. Respiratory Distress Syndrome (RDS) prevention starts during pregnancy, considering all the possible interventions aiming to prolong the gestation of preterm fetuses, and continues after birth. The evidence-based lung-protective strategies include the initiation of non-invasive respiratory support from birth, the judicious use of oxygen, early surfactant administration, caffeine therapy, cardiovascular assessment, and the avoidance of mechanical ventilation where possible. Lung ultrasound has replaced conventional radiology in the diagnosis of RDS, allowing neonatologists to act quickly and avoid unnecessary radiation exposure to the baby. The modern approach to RDS should be personalized, taking a physiopathology and critical care perspective, which can only be built by developing cross-disciplinary awareness in order to avoid chronic lung disease.

Guest Editor

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Message from the Editor-in-Chief

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