**Conclusions**  Epoprostenol as the sole anti-haemostatic agent for CRRT increases mean filter life, decreases bleeding risk without increasing risk of hypotension, platelet transfusion or mortality.

**O-203a** INHALED MAGNESIUM FOR MODERATE AND SEVERE PAEDIATRIC ASThma

H Abu Rasheed, D AlAnsari. Division of Pediatric Emergency Medicine, Department of Pediatrics, Hamad Medical Corporation, Doha, Qatar

**Background** Intravenous magnesium sulfate, a rescue therapy added to combined bronchodilator and systemic steroid therapy for moderate and severe asthma, is uncommonly administered. We hypothesised that nebulized magnesium sulfate would confer benefit without undue risk.

**Methods** Patients aged 2 to 14 y with moderate and severe status asthmaticus (PRAM severity score >4) admitted to inpatient care were randomised double-blind to 800 mg nebulised magnesium sulfate or normal saline placebo via Aeroneb Pro and Idlehaler, after intensive therapy with combined albuterol-irapropium and intravenous methylprednisolone. Time to medical readiness for discharge was the primary outcome; sample size was chosen to detect a 10% improvement. Improvement over time in PRAM severity score and other secondary outcomes were compared for the overall group and severe asthma subset.

**Results** 191 magnesium sulfate and 174 placebo patients met criteria for analysis. The groups were similar with mean baseline PRAM scores >7. Blinded active therapy significantly increased blood magnesium level 2 h post-treatment 0.85 (SD 0.07) vs 0.82