A Review On: Mucosal Atomization Device

More Yogesh¹, Sonal Shinde², Vikas Wamane³

^{2, 3}Assistant professor ^{1, 2, 3} Pratibhatai Pawar College of pharmacy

Abstract- Transmucosal nasal shipping is a promising drug shipping choice wherein commondrug administrations (e.g., intramuscular, orintravenous, oral) inapplicable. Recently, it's been proven that many tablets have higher bioavailability via way of means of nasalcourse than via way of means of oral course. This has been attributed to wealthy vasculature and a highlypermeable shape of the nasalmucosa coupled with avoidance of hepatic first-Byskip elimination, intestine wall metabolism and/or destruction withinside the gastrointestinal tract. The purpose of this take a look at became to decide the effect of long-time period topical budesonideremedy thru the mucosal atomization device (MAD) at the hypothalamic-pituitaryadrenal axis(HPAA) and intraocular pressure (IOP). The Mucosal Atomization Device (MAD) distributes medicinal drug during the paranasal sinusesfor sufferers with continual rhinosinusitis (CRS). Determining the premiere head positionis vital to make sure maximal shipping of medicine to the sinus cavities. The goal of this paintings became to decide the impact of the lying-headback (LHB) andhead-down forward (HDF) position, at the distribution of topical nasalmedicinal drug thru MAD incadaver specimens.

Keywords- Mucosal atomization devices,

I. INTRODUCTION

The Intranasal Mucosal Atomization Device (MAD) is an adapter that may beconnected to a luer lock syringe to show liquid remedy into an atomized mist forintranasal transport of the drug. The era is much like Afrin and different nasalsprays. In veterinary medicinal drug the intranasal MAD may be used for in-health center or at-domestic transport of emergency medicinal drugs whilst IV get entry to isn't to be had. It wouldbasically be used for at-domestic emergency transport of midazolam or diazepam duringa seizure. The tool will also be used with saline for animals with very dry nasalpassages, with DDA¹.Transmucosal routes of drug transport (i.e., the mucosal linings of the nasal, rectal, vagina, ocular and oral hollow space) provide wonderful blessings over peroralmanagement for systemic drug transport. These blessings consists of possiblepass of the primary byskip impact, avoidance of presystemic removal of gastrointestinal tract and relying at the unique drug. The nasal hollow space as a domain forneighborhood and systemic drug transport has been investigated with the aid of using many studies groups14and the direction has already reached business popularity with numerous tablets including calcitonin5, 6. However, the capability infection and irreversible harm ciliarymovement software of nasal dosage forms, in addition to the huge intra and inter subject variability in mucus secretion withinside the nasal mucosa may want to substantially impact drugabsorption from this site. Seizures are a not unusualplace trouble in veterinary medicinal drug, affecting an envisioned 0.5-5.7% of all puppies, and comprising a great percentage of sufferers provided toeach preferred and referral veterinary practices (Cunningham & Farnbach, 1988). Despite suitable anticonvulsant therapy, about 20-30% of canineepileptics continue to be poorly managed with presently to be had clinical therapy, andlots of those puppies expand repeat episodes of cluster seizures and popularityepilepticus (Farnbach, 1984; Schwartz-Porsche et al., 1985; Lane & Bunch, 1990; Podell, 1996). These situations may have excessive damaging scientific consequences includinghyperthermia, metabolic acidosis, muscle necrosis, noncardiogenic pulmonaryedema, aspiration pneumonia, renal failure, cerebral edema, neuronal necrosis, anddeath, and consequently represent a real clinical emergency. The emotional andeconomic toll of routine emergency hospitalization reasons many proprietors to electeuthanasia for those sufferers. Emergent remedy for seizures is normally initiated with intravenous (i.v.)management of benzodiazepine drug, usually diazepam. Diazepam fantastically lipidsoluble, and movements unexpectedly throughout the blood-mind barrier into the apprehensive device toacquire its scientific effect. It is unexpectedly metabolized, predominantly with the aid of using the liver, to thefundamental metabolites desmethyl diazepam (nordiazepam) and oxazepam. Thesemetabolites have among 20% and 50% of the hobby of diazepam itself (Randall etal., 1965; Frey & Loscher, 1982; Boothe, 1998). Although i.v. benzodiazepines oftenoffer a fast and powerful scientific response, acquiring i.v. get right of entry to may betechnically tough in a affected person with ongoing seizure hobby, hence delaying thetime to drug management or stopping transport entirely. Rectal management of possible, which include in actively seizing sufferers and for at-domestic use inpuppies with clusterseizures. Although this path may be powerful (Podell, 1995), rectal managementmay be inconvenient and ugly for owners, can bring about faulty transport or expulsion of thedrug, and can bring about unpredictable systemic absorption (Mealey &Boothe, 1995). In addition, the presence

Page | 102 www.ijsart.com

of feces withinside the rectum can impair accurate transport. In people, one gain of rectal management is to skip hepatic first-Byskip metabolism, generating excessive concentrations, due to the fact venous drainagefrom the distal rectum flows to the vena cava in place of the portal vein. However, this isn't always a bonus in puppies. Importantly, venous drainage of the rectum of puppiesdictates that almost all of rectally administered drug could be absorbed into the portalcirculation, and go through first-byskip hepatic metabolism.As a result, concentrations ofthe discern drug in the systemic stream can be very low, which precludes theuse of this direction for a few medicinal drugs (Podell et al., 1998; Barnhart et al., 2000). Fordiazepam, scientific effectiveness turns into depending on its much less-livelymetabolites(Papich & Alcorn, 1995). In addition, animals receiving hepatic enzyme inducingmedicinal drugs along with phenobarbital may have upregulated metabolism of diazepam, necessitating better doses to acquire the supposed scientific effect (Wagner et al.,1998). Intranasal (i.n.) management is an tradedirection for anticonvulsant drugremedy that circumvents a number of the barriers of i.v. and rectal drug management.Intranasal management is simple, effortlessly finished through individuals with out scientifictraining, and is much less awkward than rectal transport for lots owners. The densevascular plexus of the nasal mucosa permits for speedy absorption of drug into the systemic stream, with avoidance of first-byskip hepatic metabolism (Harris et al.,1986; Jones et al., 1997). In addition, there may be great proof that a fewcompounds, along with antimigraine drugs, morphine and proteins/peptides such asnerve boom component, and vascular endothelial boom component absorbed via theolfactory mucosa can also additionally byskip immediately into the vital fearful gadget after i.n. transport(Rapoport & Winner, 2006; Westin et al., 2006; Hanson & Frey, 2007; Yang et al., 2009). Higher drug concentrations had been located in the cerebrospinal fluidcompared with blood after intranasal transport of midazolam in preceding dogstudies (Henry et al., 1998). Physiochemical drug houses such as lipophilicity and occasional molecular weight had been proven to facilitate each systemic and directvital fearful gadget absorption after intranasal management of a lot of thesedrugs (Costantino et al., 2007). Intranasal management of medicinal drugs has beensubstantially documented withinside the human scientific literature for a number ofindications such as the avoidance of needles, preanesthetic sedation in children, remedy ofacute pain, and for the emergent transport of anticonvulsant and antimigrainemedicinal drugs (Jones et al., 1997; Wolfe & Bernstone, 2004: Barton etal., 2005:Rapoport & Winner, 2006; Wermeling, 2009). Because intravenous management of diazepam isn't always usually possible and rectalmanagement is related to tremendous barriers in dog patients, this take a look atn changed into performed to assess the i.n. direction as

an greatest alternative. Absorption of i.n.diazepam in puppies after nasal drop management changed into formerly verifiedthroughPlatt et al. (2000). However, the conclusions of that take a look at had been restricted due to the fact thebenzodiazepines had been analyzed with a semiquantitative fluorescence polarizationimmunoassay (FPIA) approach that couldn't correctly quantify diazepam. Wehypothesized that i.n. management of diazepam with a mucosal atomization devicecould bring about advanced absorption and better blood ranges of the drug whenas in comparison with a nasal drop approach. To correctly quantify diazepam plus the twopredominant metabolites(desmethyldiazepam and oxazepam), certainly considered one among our particular changed into to apply a touchy particular high-overall and performance liquidchromatography (HPLC)assay, which could permit correct dedication of the pharmacokinetics of thestronger discern drug in addition to its lively metabolites¹⁴.

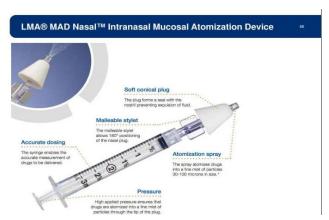


FIG. MUCOSAL ATOMIZATION DEVICE

Mucosal atomization tool (MAD) training to be greater tolerable. The MAD hasbeen proven to very well distribute topical medicinal drug to the sinuses in cadaverfashions and correctly deal with sinus sickness in scientific studies.5-7Unfortunately, theequal best this is idea to make the MAD efficacious withinside the remedy of mucosalinfection (ie, droplet distribution and retention)eight may additionally growth the potential for systemic aspect effects. Although the protection profile of wellknown topical nasalcorticosteroid sprays (INCs) has been properly established,9, 10 the off-label use ofbudesonide respules for topical remedy of sinonasal infection has occupied agrey region withinside the past. A randomized, managed trial from our middle demonstrated short-term (60 days) protection of budesonide added through each the MAD and INSI. This tool is fine because it produces a nice mist, growing the potentialtouch floor region withinside the nasal hollow space and paranasal sinuses. Clinicianenjoy has located that sufferers administering medicinal drug withinside the lying-

Page | 103 www.ijsart.com

head-backrole (LHB) can correctly deal with the edematous mucosa of the ethmoid roof andfrontal sinus recess. Patients are mechanically told to lie supine and grasp theirheads over the threshold in their mattress to quality simulate this role. Our goal become todecide if the LHB role accelerated medicinal drug dispersal inside sinonasacavities as compared to the HDF role in a human cadaver model.

REASON FOR DEVELOPMENT OF NASAL DELIVERY

Nasal drug shipping is a beneficial shipping approach for capsules which might beenergetic in lowdoses and display no or minimum oral bioavailability. The nasal path circumventhepatic first byskip removal related to the oral shipping: it's far without problems accessibleand appropriate for self-medication. Currently, tow lessons of nasally deliveredtherapeutics are at market. the The first oneincorporates low molecular weight andhydrophobic capsules for the remedy of the nasal mucosa and sinus, includingdecongestants, topical steroids, antibiotics and other (OTC) products. Thesecondclass encompasses some capsules, that have enough nasal absorption for administered with the aid of using injection and rarely absorbed after oral management because of theirinstability in gastrointestinal tract, negative absorption properties, and their speedy andhuge biotransformation

Table: Benefits of nasal drug shipping evaluation to exchange shipping strategies¹.

Key Features	Nasal	Oral	I.V.
High Drug Level	Yes	No	Yes
Rapid Onset	Yes	No	Yes
Painless	Yes	Yes	No
Self Administration	Yes	Yes	No
Low Resource Utilization	Yes	Yes	No
Bypasses BBB	Yes	No	No
Patient Compliance	High	Low	High
Hepatic First Pass Metabolism	No	Yes	No
After Taste	Low	No	High
Peptide drug Degradation	Low	High	No
Emesis	No	Yes	No

II. METHODS

This cross-sectional observational observe become performed at a tertiary rhinologymiddle in Vancouver, BC, Canada. The research become performed with approval from the University of British Columbia Clinical Research Ethics Board (H14-01608). Patients had been consented for enrollment among September 2014 and February 2016. Those sufferers who had been recognized with CRS without or with

nasal polyposisprimarily based totally at the Canadian scientific exerciserecommendations for sinusitis, eleven obtained FESS inthe past, and had been actively being dealt with with every day intranasal budesonide through MADfor six months had been invited to participate. Patients had been excluded in the event that they were its. Patients simultaneously the usage of nasal saline irrigation areinformed to managebudesonide through MAD half-hour after irrigation to keep away from washing out topicalmedication. Upon recruitment, demographic and scientific variables had been collectedfrom clinical charts, which includes records of sinus surgery, nasal polyposis status, bronchial allergies status, present day medications, and different comorbidities. Subjects also finished a sequence of surveys that covered the 22-object Sino-Nasal Outcomes Test(SNOT-22), and pointed questions associated with scientific signs of adrenalsuppression skilled during the route in their treatment (nausea, dizziness, vomiting, weakness, muscle aches, diarrhea). The SNOT-22 is a validatedquestionnaire used to subjectively verify sinonasal symptom severity.12 Α standard(high-dose) adrenocorticotrophic hormone (ACTH) stimulation check (250 µgcosyntropin, deltoid intramuscular technique) become prepared on the recruitment visit. Tests had been preferentially finished withinside the morning among 8:00 and 10:00 AMwhile possible. Patients had been informed to chorus from administering budesonide onthe morning of the check. Serum cortisol ranges had been suggested at baseline, then 30 and60 mins after stimulation. Patients located to illustrate inadequate reaction to mthe ACTH stimulation check had been noted an endocrinologist for a extra thoroughassessment of adrenal function. Criteria for secondary adrenal insufficiency had been satisfiedif both of the subsequent situations had been met: inspired serum cortisol. Cadaver specimens have been collected from 2 superior sinus surgical operation coursestaking region in July and August 2012. Ethics approval changed intoacquired fromtheUniversity of British Columbia Research Ethics Board previous to the begin of this take a look at. Subjects protected have been cadaver specimens with out preceding sinus surgical operation, nasalpolyposis, widespread septal deviations, septal perforations, or facial trauma. All specimens obtained entire endoscopic dissection, which protected bilateraluncinectomy, maxillary sinus antrostomy, ethmoidectomy, sphenoidotomy, andfrontal sinusotomy (Draf Type IIa). Post dissection, 2 ml of fluorescein (FluoresciteInjection, Alcon Inc., Fort Worth, TX) changed into jumbled together a sterile emesis basin with ninety mLof sterile salineto provide a 0.20 mg/mL answer. This answer changed into then drawn into a 3-cc (3-mL) Luer-Lock syringe affixed to a MAD to distribute 1 mL of technique to the proper and left nasal valves. Cadaver specimens obtained remedy in both the LHBor HDF function. The LHB function changed into described because the chin being at the very best pointof

Page | 104 www.ijsart.com

the pinnacle, nine 60 stages underneath the horizontal aircraft. This attitude changed into decided on tosimulate the location of a affected person as their head hangs over the threshold in their bed . The HDF function changed into described because the brow near the knees9 at an attitude offorty stages underneath the horizontal aircraft with the nostrils going through upwards. Nine Ananalog protractor correct to the closest diploma changed into used to affirm andstandardize every orientation. Once positioned, three-quarters of the MAD tipchanged into inserted at a 45-diploma attitude into the nasal aperture after which directed to theipsilateral orbit. One mililiter (1 mL) of fluorescein answer changed into atomized thru theproper or left nostril (relying on take a look at arm) and the specimen remained in function for 30 seconds previous to endoscopy. Rigid nasal endoscopy changed into finished with a 0-diploma and 30- diploma pediatric endoscope with a blue-mild clear out out connected to themild source (Karl Storz).

Images of the paranasal sinuses (maxillary, ethmoid, sphenoid, frontal) and different clinically applicable locations (inferior turbinate, anteriorseptum, center turbinate, olfactory cleft, frontal recess, sphe noethmoid recess, andnasopharynx) have been captured. The proper paranasal sinuses have been first to acquire thefluorescein spray for all specimens protected. Once the manner changed into finished onthe proper side, the pinnacle changed into reoriented to the opportunity head function and the leftparanasal sinuses obtained the fluorescein nasal spray. To save you retrograderegurgitation of the dye, the sinus cavities have been vigorously rinsed with regular salineand extra dye changed into eliminated from the endoscope with an alcohol swab, previous tospraying the alternative paranasal sinuses. Sinus cavities have been visualized to affirmthe dye changed into eliminated. These tactics have been standardized for all specimens.Blinded assessment of all captured snap shots changed into carried out independently through 3rhinologists (A.R.J., E.C.G., and A.V.T.)



FIGURE 1. LHB position angled approximately 60 degrees below the horizontal plane. LHB = lying head back.



FIGURE 2. HDF position angled to approximately 40 degrees below th horizontal plane. HDF = head-down and forward.



fig.: The LMA MADgic airway with syringe and oxygen tubing Laryngo-Tracheal Mucosal Atomization Device: LMA MADgic⁵

III. STATISTICAL ANALYSIS

Data turned into collected, tabulated. Numerical variables had been supplied as imply andfashionable deviation (SD) at the same time as specific variables had been supplied as frequency andpercentage. As regard numerical variables,

Page | 105 www.ijsart.com

unpaired scholar 2 t take a look at turned into usedeach time suitable among-organization comparisons; at the same time as for specific variables, chi2square take a look at turned into used. A distinction with sizeable level (p7Descriptive analyses had been carried out to evaluate the adrenal suppression organization with the ordinary cortisol reaction organization, along side different key associations. Allnon-stop variables had been skewed, so the nonparametric MannWhitney U rank sumtake a look at turned into used to check for variations among the two groups. Categorical variableshad been assessed the use of the chi-rectangular take a look at or Fisher's genuine take a look at while the range of instances in line with organization turned into < 0.2 on univariate analysis. STATA model 12.1 (StataCorp,College Station, TX) turned into used for the analysis, with p < 0.05 taken into consideration statisticallysizeable.

IV. CURRENT ROLE AND FUTURE DIRECTIONS

As mentioned above, naloxone management thru the intranasal path has been proven to be a secure and powerful intervention for the preliminary control opioidoverdose.30,31 There stays a want for an powerful naloxone shipping machine thatis more secure and simpler for each bystanders and scientific employees to manage thanstrategies presently in use. Forty four A needle-free, ready-to-use, unit dose shipping machinefor the intranasal management of naloxone is presently withinside the scientific developmentstage, with an lively investigational new drug software submitted to FDA. Forty five Thistechnology, which mixes a nasal spray tool with a naloxone solution particularly formulated for nasal shipping, Forty four will facilitate the secure and rapidmanagement of naloxone thru the intranasal path. It is anticipated that this product willcarry out higher than the prevailing preferred of take care of opioid overdoses12.

V. DISCUSSION

Postoperative nasal irrigation and pharmacotherapy is an crucial elementof consequences control following purposeful endoscopic sinus surgery (FESS). Depending at the institution, the usual of care can also additionally dictate that medicines beadministered through impregnated nasal irrigation, or that separate gadgets be used toirrigate the nostril and follow topical medicines. Common nasal irrigators encompassthe 240-mL PowerRinse bottle (Honeydoc Inc, Vancouver, Canada), the 240-mLNeilMed Sinus Rinse bottle (NeilMed Pharmaceuticals, Inc., Santa Rosa, CA), the 240-mL NetiPot (NeilMed Pharmaceuticals), and NasalCare Rinse bottle (TechWorldCorp Inc., Las Vegas, NV). Medications brought through nasal irrigation generally tend to getdiluted

and are consequently much less effective. The atomization tool permits for a morefocused dose to be brought to the place in want. There are a variety of ofatomization gadgets available in the marketplace and that they may be divided into three extraordinary types:squeeze, pump, and mechanical. The MAD is taken into consideration a pump atomization tool. The medical literature at the efficacy of the MAD is scarce. The simplest medicaltake a look at in otolaryngology assessing the efficacy of the MAD confirmed that topicalbudesonide through MAD can also additionally lessen thewant for systemic prednisone and enhance each doctor and affected person international evaluation ratings in postsurgical CRS sufferers.1 To our know-how, there are presently no posted facts withinside the literature at the consequences of various head positionsat the distribution of topical medicinal drug withinside the sinuses the usage of the MAD. This is the firsttake a look at to evaluate the greatest head function for CRS sufferers the usage of the MAD. Thistake a look at indicates that specimens orientated withinside the LHB function have extra dispersal of medicinal drug for the duration of the sinonasal cavities than specimens orientated withinside the HDFfunction. The odds of standard staining withinside the LHB function are three.2, while the chancesof standard staining withinside the HDF function are 0.7. This also can be interpreted as; theodds of standard staining in LHB is 4.five instances extra than the chances withinside the HDFfunction. This know-how is critical to supplying greatest care to postsurgical sufferers. Senior et al. eleven confirmed that properly treating mucosal infection after surgeryboth medically or with debridement almost gets rid of risk of revision surgery. Moreover, recurrent frontal sinusitis is a not unusualplace purpose for revision surgery.12Based at the consequences of our take a look at, the LHB function must be the recommended function for management of topical intranasal medicinal drug. We hypothesize thatmultiplied spatial distribution of drugs because of the LHB function can also additionally lesseninternational and frontal sinus-precise mucosal infection. However, this hypothesishave to be evaluated in next human trials accounting for versions in attitude of the head, sinonasal anatomy, and pressure of plungerdepression. The diploma of dissection to open sinus cavities also can effectdistribution. The diploma of openinginto the maxillary sinus may be controversial. Grobler et al.thirteen decided that anostia large than This become similarly supported with the aid of using Hyo et al.14 Sphenoidsinuses, on the opposite hand, do now no longer have a maximal ostial length and the penetrationinto the sphenoid sinus is correlated with length. Eight However, in our experience, it is prudent to restriction the sphenoidotomy to five to ten mm, due to the fact sufferers bitch of complications from inspiring bloodless air whilst the bulk in their sphenoid face has been removed. Much just like the sphenoid sinus,

Page | 106 www.ijsart.com

multiplied penetration into the frontal sinushappens with similarly dissection. Eight The most appropriate length of aerosolized debris has alsobeen investigated and stays a debatable subject matterBased at the effects of our study, the LHB role ought to be the recommendedrole for management topical intranasal medication. We hypothesize thatmultiplied spatial distribution of drugs because of the LHB role might also additionally reduceworldwide and frontal sinus-precise mucosal inflammation. However. this hypothesishave to be evaluated in next human trials accounting for versions in perspective of the head, sinonasal anatomy, and pressure of plunger depression. The diploma of dissection to open sinus cavities also can effect distribution. The diploma of openinginto the maxillary sinus may be debatable. Grobler et al.thirteen decided that anostia large.

VI. CONCLUSIOS

This cross-sectional look at has proven that a subgroup of recalcitrant CRSsufferers on long-time period renovation remedy with topical budesonide brought throughMAD confirmed asymptomatic adrenal suppression (3%). A separate subgroup of those sufferers became determined to have expanded IOP (6%). Although the crosssectionallayout inherently limits our cappotential to ascribe those detrimental occasions totopicalbudesonide exclusively, stringent measures taken govern potential confounders make this etiology plausible. These findings recommend that sufferers using the MAD to manage nasal budesonide can be vulnerable togrowing thosesequelae withinside the long time and must be monitored accordingly. Until specificscreening pointers may be set up primarily based totally on potential research, asurveillance protocol for sufferers dealt with with long-time period budesonide through MAD mayencompass annual adrenal feature and intraocular stress testing.

VII. RESULTS

A general of 946 patient-care data have been reviewed—518 withinside the preMAD organization and 428 withinside the put up-MAD organization. In the premade organization, of the 518 charts reviewed, one hundred thirty five sufferers (26.1%) met the standards for ache remedy administration; of these, forty one(30.4%) obtained fentanyl. In the put up-MAD organization, of the 428 charts reviewed, 98sufferers (22.9%) met the standards, and of these, 36 (36.7%) obtained fentanyl.Only 13(36.1%) sufferers of these receiving fentanyl have been dealt with with the MAD. Using then Kappa score, reviewer settlement for each the pre and put up MAD corporations became 86.7%(95% CI, 0.811-0.924). The suggest age, in years, of each the pre-MAD organization

and theput up-MAD organization became identical (9.9, SD 4.five). Both corporations have been predominantly male. There became no distinction withinside the suggest Glasgow Coma Scale or suggest preliminary pulse. The distinction among the suggest preliminary respiration price became giant: 22.3 (SD 6.1) inP, .05. Males tended to acquire fentanyl greater than girls in each the pre- and put up-MAD corporations (37.9% vs 26.9%). However, this fashion became now no longer statistically giant. Furthermore, therebecame a fashion closer to older kids receiving fentanyl while in comparison with youngerkids. Just over 23% ofthesereceiving fentanyl have been 0-five years of age; 27.6% have been 6-10 years of age; and 39.8% have been 11-15 years of age. Again, even as there becamea fashion, it did now no longer attain statistical significance. Mechanism of damage, however, became astatistically giant predictor of fentanyl administration. The percent of kidsreceiving fentanyl via way of means of mechanism of damagebecame assault, 16.7%; burn, 69.2%; cut,20.0%; fall, 40.9%; motor car crash, 13.0%; struck via way of means of or against, 33.3%; andother, 33.6%; P. .001. Injuries withinside the "other" class covered animal bite, bicycle, pedestrian, penetrating, or sports activities damage. The logistic regression evaluation of theelements influencing fentanyl use is supplied in Table 1. As age increased, theprobability of receiving fentanyl increased. Similar effects have been determined for preliminary pulseof the patient. Burn sufferers have been related to an growth in fentanyl use withinside theput up-MAD period (adjusted odds five 6.34; 95% CI, 1.14-35.forty one) even as motor carcrash sufferers have been related to a lower in fentanyl use withinside the put up-MADperiod (odds five 0.29; 95% CI, 0.09 - 0.89).

REFERENCES

- [1] Dhakar, R.C., 2011. Nasal drug delivery: success through integrated device development. *Journal of Drug Delivery and Therapeutics*,
- [2] Effect of introducing the mucosal atomization device for fentanyl use in out-of-hospital pediatric trauma patients. O'Donnell, D.P., Schafer, L.C., Stevens, A.C., Weinstein, E., Miramonti, C.M. and Kozak, M.A., 2013.
- [3] Safety of long-term intranasal budesonide delivered via the mucosal atomization device for chronic rhinosinusitis. Manji, J., Singh, G., Okpaleke, C., Dadgostar, A., Al-Asousi, F., Amanian, A., Macias-Valle, L., Finkelstein, A., Tacey, M., Thamboo, A. and Javer, A., 2017, May.
- [4] Maximum volume of nasal administration using a mucosal atomization device without aspiration in Japanese White rabbits. Wei, Y., Hori, A., Chen, I.Y.,

Page | 107 www.ijsart.com

- Tamogi, H., Hirokawa, T., Kato, K., Itami, T., Sano, T. and Yamashita, K., 2022.
- [5] A Comparative Study of Airway Nerve Blocks and Atomized Lidocaine by the Laryngo-Tracheal Mucosal Atomization Device (LMA MADgic) Airway for Oral Awake Fiberoptic Intubation. Yadav, U., Kumar, A. and Gupta, P., 2021
- [6] A randomized study of midazolam versus dexmedetomidine for premedication in children via intranasal mucosal atomization device. *International Journal of Health Sciences* Mehta, M., Shah, R., Tyagi, A. and Madhuri, V.,
- [7] Intranasal naloxone administration for treatment of opioid overdose. Robinson, A. and Wermeling, D.P., 2014.
- [8] Diazepam pharmacokinetics after nasal drop and atomized nasal administration in dogs. *Journal of Veterinary Pharmacology and Therapeutics* Musulin, S.E., Mariani, C.L. and Papich, M.G., 2011.
- [9] December. The effect of head position on the distribution of topical nasal medication using the Mucosal Atomization Device: a cadaver study. In *International* forum of allergy & rhinology Habib, A.R.R., Thamboo, A., Manji, J., Dar Santos, R.C., Gan, E.C., Anstead, A. and Javer, A.R., 2013
- [10] The safety and efficacy of short-term budesonide delivered via mucosal atomization device for chronic rhinosinusitis without nasal polyposis. In *International forum of allergy & rhinology* Thamboo, A., Manji, J., Szeitz, A., Santos, R.D., Hathorn, I., Gan, E.C., Alsaleh, S. and Javer, A.R., 2014, May.
- [11] Maximum volume of nasal administration using a mucosal atomization device without aspiration in Japanese White rabbits. *Journal of Veterinary Medical Science* Wei, Y., Hori, A., Chen, I.Y., Tamogi, H., Hirokawa, T., Kato, K., Itami, T., Sano, T. and Yamashita, K., 2022.
- [12] Safety of long-term intranasal budesonide delivered via the mucosal atomization device for chronic rhinosinusitis. In *International Forum of Allergy & Rhinology* Manji, J., Singh, G., Okpaleke, C., Dadgostar, A., Al-Asousi, F., Amanian, A., Macias-Valle, L., Finkelstein, A., Tacey, M., Thamboo, A. and Javer, A., 2017, May.
- [13] Classification of atomization devices. Vasilyev, A.Y., Domrina, E.S., Kaufman, S.V. and Maiorova, A.I., 2019, November.
- [14] Topical budesonide via mucosal atomization device in refractory postoperative chronic rhinosinusitis Kanowitz, S.J., Batra, P.S. and Citardi, M.J., 2008.
- [15] Effect of introducing the mucosal atomization device for fentanyl use in out-of-hospital pediatric trauma patients O'Donnell, D.P., Schafer, L.C., Stevens, A.C., Weinstein, E., Miramonti, C.M. and Kozak, M.A., 2013.

Page | 108 www.ijsart.com