# ANESTHESIOLOGY





### ON THE COVER:

Translating experimental findings in rodents to new treatment for pain in people is difficult. In this issue we highlight a new and promising translational development—treating clinical pain in our pets to improve their care while helping develop treatment for their owners.

- Hayashida: Substance P-Saporin for Bone Cancer Pain in Dogs: Can Man's Best Friend Solve the Lost in Translation Problem in Analgesic Development?, p. 999
- Wiese et al.: Intrathecal Substance P-Saporin in the Dog: Distribution, Safety, and Spinal Neurokinin-1 Receptor Ablation, p. 1163
- Brown and Agnello: Intrathecal Substance P-Saporin in the Dog: Efficacy in Bone Cancer Pain, p. 1178

### THIS MONTH IN ANESTHESIOLOGY

1A

1014

### **EDITORIAL VIEWS**

Substance P-Saporin for Bone Cancer Pain in Dogs: Can Man's Best Friend Solve the Lost in Translation Problem in Analgesic Development? 999 Ken-ichiro Hayashida Humanitarian Surgery: A Call to Action for Anesthesiologists 1001 Deane Marchbein Consciousness and the 21st Century Operating Room 1003 George A. Mashour Exome Sequencing: One Small Step for Malignant Hyperthermia, One Giant Step for Our Specialty—Why Exome Sequencing Matters to All of Us, Not Just the Experts 1006 Peter Nagele Horace Wells' "Humbug Affair" Occurred at Massachusetts General Hospital? Humbug! 1009 Ma Sleep, Respiration, and Pain: A Potential Nexus for Chronic Pain Risk? 1011

### ■ SPECIAL ARTICLES

♦ Horace Wells' Demonstration of Nitrous Oxide in Boston Rajesh P. Haridas

The Foregger Midget: A Machine that Traveled 1023 Christine M. Ball



Refers to Editorial Views

Michael T. Smith and Patrick H. Finan

CME Article

See Supplemental Digital Content

Ma Meeting Article

# **■ PERIOPERATIVE MEDICINE** ♦♦⊕ Simultaneous Electroencephalographic and Functional Magnetic Resonance Imaging Indicate Impaired Cortical Top-Down Processing in Association with Anesthetic-induced Unconsciousness 1031 Denis Jordan, Rüdiger Ilg, Valentin Riedl, Anna Schorer, Sabine Grimberg, Susanne Neufang, Adem Omerovic, Sebastian Berger, Gisela Untergehrer, Christine Preibisch, Enrico Schulz, Tibor Schuster, Manuel Schröter, Victor Spoormaker, Claus Zimmer, Bernhard Hemmer, Afra Wohlschläger, Eberhard F. Kochs, and Gerhard Schneider Both simultaneous electroencephalographic and functional magnetic resonance imaging measurement confirmed a decreased connectivity in frontoparietal feedback networks with propofol-induced unconsciousness. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT Using Exome Data to Identify Malignant Hyperthermia Susceptibility Mutations 1043 Stephen G. Gonsalves, David Ng, Jennifer J. Johnston, Jamie K. Teer, NISC Comparative Sequencing Program, Peter D. Stenson, David N. Cooper, James C. Mullikin, and Leslie G. Biesecker In 870 volunteers not ascertained for malignant hyperthermia susceptibility, numerous variants in RYR1 and CACNA1S genes were observed, some consistent and others inconsistent with presumed pathogenicity in current databases. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT Exome Sequencing Reveals Novel Rare Variants in the Ryanodine Receptor and Calcium Channel Genes in Malignant Hyperthermia Families 1054 Jerry H. Kim, Gail P. Jarvik, Brian L. Browning, Ramakrishnan Rajagopalan, Adam S. Gordon, Mark J. Rieder, Peggy D. Robertson, Deborah A. Nickerson, Nickla A. Fisher, and Philip M. Hopkins Exome sequencing of DNAs from four pedigrees associated with malignant hyperthermia identified novel genetic variant in each. The increased sensitivity of exome sequencing combined with allele frequency data is a powerful approach to identify rare genetic variants-associated malignant hyperthermia. Realizing Improved Patient Care through Human-centered Operating Room Design: A Human Factors Methodology for Observing Flow Disruptions in the Cardiothoracic **Operating Room** 1066 Gary Palmer II, James H. Abernathy III, Greg Swinton, David Allison, Joel Greenstein, Scott Shappell, Kevin Juang, and Scott T. Reeves There were an average of about 100 flow disturbances per case. One third of the disturbances were related to operating room layout and design. Positive End-expiratory Pressure Influences Echocardiographic Measures of Diastolic Function: A Randomized, Crossover Study in Cardiac Surgery Patients 1078 Peter Juhl-Olsen, Johan Fridolf Hermansen, Christian Alcaraz Frederiksen, Linda Aagaard Rasmussen, Carl-Johan Jakobsen, and Erik Sloth Individual pulsed wave Doppler and tissue Doppler indices of left ventricular diastolic function are subject to change with increasing positive end-expiratory pressure in postoperative cardiac surgery patients. The presence of positive

Ma 
Assessment of Homology Templates and an Anesthetic Binding Site within the γ-Aminobutyric Acid Receptor

1087

Edward J. Bertaccini, Ozge Yoluk, Erik R. Lindahl, and James R. Trudell

Molecular modeling revealed a putative intersubunit binding site for propofol that predicted the potency of propofol congeners for receptor potentiation. This approach might provide the basis for high-throughput *in silico* screening of novel anesthetic compounds. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT

pressure ventilation should thus be taken into account when evaluating echocardiographic indices of diastolic function.

# Bumetanide, an Inhibitor of Cation-chloride Cotransporter Isoform 1, Inhibits γ-Aminobutyric Acidergic Excitatory Actions and Enhances Sedative Actions of Midazolam in Neonatal Rats 1096 Yukihide Koyama, Tomio Andoh, Yoshinori Kamiya, Satoshi Morita, Tomoyuki Miyazaki, Kazuhiro Uchimoto, Takahiro Mihara, and Takahisa Goto Bumetanide, a selective inhibitor of the transporter NKCC1, reduced neuroexcitatory effects in hippocampal slices and increased sedation by midazolam in neonatal rat. The neuroexcitatory effects and reduced sedative activity of midazolam in neonatal rats appear to involve increased intracellular chloride produced by NKCC1. Effect of Hemorrhage and Hypotension on Transcranial Motor-evoked Potentials in 1109 Jeremy A. Lieberman, John Feiner, Russ Lyon, and Mark D. Rollins Treatment of hemorrhage-induced hypotension and reductions in potential amplitude was less effective with phenylephrine than with epinephrine, which also increased cardiac output and oxygen delivery. This animal model suggests that monitoring cardiac output facilitates treatment of hemorrhage-induced reductions in motor-evoked potentials in spine surgery. ■ CRITICAL CARE MEDICINE <sup>13</sup>C NMR Metabolomic Evaluation of Immediate and Delayed Mild Hypothermia in Cerebrocortical Slices after Oxygen-Glucose Deprivation 1120 Jia Liu, Mark R. Segal, Mark J. S. Kelly, Jeffrey G. Pelton, Myungwon Kim, Thomas L. James, and Lawrence Litt Spectroscopy in a highly controlled brain oxygen–glucose-deprivation slice model using neonatal rats was used during three different mild hypothermia protocols. Starting mild hypothermia simultaneously with oxygen-glucose-deprivation compared with delayed or no hypothermia is associated with higher pyruvate carboxylase throughput. This suggests that glial integrity is one key component of the neuroprotective effect of mild hypothermia. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT Neuroprotection against Traumatic Brain Injury by Xenon, but Not Argon, Is Mediated by Inhibition at the N-Methyl-D-Aspartate Receptor Glycine Site 1137 Katie Harris, Scott P. Armstrong, Rita Campos-Pires, Louise Kiru, Nicholas P. Franks, and Robert Dickinson Given after traumatic injury to hippocampal slices, xenon (and argon to a lesser degree) halves the secondary neuronal injury. N-methyl-D-aspartate antagonism is an important component of this protective effect. **■ PAIN MEDICINE** Suffering from Sleep-disordered Breathing 1149 Anthony G. Doufas, Lu Tian, Margaret Frances Davies, and Simon C. Warby In a review of over 634 individuals in the Cleveland Family Study, a study of genetics in obstructive sleep apnea, nocturnal oxyhemoglobin desaturation was independently associated with morning headache, headache disrupting sleep,

# ➡○◆ Nocturnal Intermittent Hypoxia Is Independently Associated with Pain in Subjects

chest pain while in bed, and pain disrupting sleep.

## Intrathecal Substance P-Saporin in the Dog: Distribution, Safety, and Spinal Neurokinin-1 Receptor Ablation 1163

Ashley J. Wiese, Michael Rathbun, Mark T. Butt, Shelle A. Malkmus, Philip J. Richter, Kent G. Osborn, Qinghao Xu, Samantha L. Veesart, Joanne J. Steinauer, Denise Higgins, Douglas A. Lappi, Brian Russell, and Tony L. Yaksh

Lumbar intrathecal injection of substance P-saporin, 15 µg, resulted in loss of neurons in the spinal cord dorsal horn expressing the neurokinin-1 receptor. A larger dose, 150 µg, resulted in progressive lower limb paresis and loss of motor neurons in the ventral horn expressing the neurokinin-1 receptor. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT

# CONTENTS

<b>\_</b>	Intrathecal Substance P-Saporin in the Dog: Efficacy in Bone Cancer Pain Dorothy Cimino Brown, and Kimberly Agnello	1178
	Substance P-saporin (SAP) is a chemical conjugate of substance P, a tachykinin neuropeptide, and saporin, a recombinant version of a ribosomal-inactivating protein, that selectively destroys superficial neurokinin-1 receptor bearing cells in the spinal dorsal horn when it is administered intrathecally. Bone cancer is commonly associated with severe pain that evolves over time and is refractory to conventional pain therapies in both dogs and humans. Seventy companion dogs with bone cancer pain were randomly assigned to receive standard analgesic therapy alone or with intrathecally administered SAP. Intrathecally administered SAP produced a time-dependent antinociceptive effect; owners requested unblinding and additional intervention by 6 weeks in 74% of control dogs and 24% of SAP-treated dogs. There was no evidence of deafferentiation in the SAP-treated dogs, but hind limb weakness and ataxia were observed in some dogs receiving cisternal injections of SAP before doses for animals with front limb tumors were decreased.	
	Effect of Deep Tissue Incision on pH Responses of Afferent Fibers and Dorsal Root Ganglia Innervating Muscle Kanta Kido, Mamta Gautam, Christopher J. Benson, He Gu, and Timothy J. Brennan	1186
	Using a muscle–nerve preparation from the rat hind paw, the authors were able to demonstrate that incision sensitizes afferent nerve fibers serving deep tissues. Acid-sensing ion channels may be responsible for this pain-related sensitization.	
	Epigenetic Regulation of Spinal CXCR2 Signaling in Incisional Hypersensitivity in Mice	1198
	Yuan Sun, Peyman Sahbaie, De-Yong Liang, Wen-Wu Li, Xiang-Qi Li, Xiao-You Shi, and J. David Clark	1190
	In mice, histone modification as one epigenetic mechanism is important to hypersensitivity after incision, and at least one epigenetic target after incision is change in CXCR2 expression.	
	EDUCATION	
IMA	AGES IN ANESTHESIOLOGY	
	An Unusual Transversus Abdominis Plane Block: Anatomic Variation in the Internal Oblique Muscle Vincent K. Lew and Andrew T. Gray	1209
	A Preoperative Headache Ferdia Bolster, Ian Crosbie, Jonathan Ryan, Frances Colreavy, and Fiona Carty	1210
ANI	ESTHESIA LITERATURE REVIEW	1211
CLI	NICAL CONCEPTS AND COMMENTARY	
CME	Perioperative Gabapentinoids: Choice of Agent, Dose, Timing, and Effects on Chronic Postsurgical Pain Peter C. Schmidt, Gabriela Ruchelli, Sean C. Mackey, and Ian R. Carroll	1215
	This article summarizes the current evidence for the use of gabapentinoids in the perioperative setting and provides useful clinical recommendations regarding dosing, timing, and choice of agent.	
MIN	ND TO MIND	
	November Hill Andrew Hart	1222
	Informed Consent Barry D. Bergquist	1223
	It Just Doesn't Make Good Business Sense Christopher Karsanac	1225

# CONTENTS

□ CORRESPONDENCE	
Sustaining a Reduction in Fresh Gas Flow Rates R. Ross Kennedy and Richard A. French	1
In Reply Bala G. Nair, Gene N. Peterson, and Howard A. Schwid	
Opioid Tolerance or Opioid Withdrawal?  Sloan C. Youngblood and Mark J. Harbott	
In Reply Sung-Hoon Kim, Jeong-Yeon Hong, and Jai-Hyun Hwang	
■ ANESTHESIOLOGY REFLECTIONS FROM THE WOOD LIBRARY-MUSEUM	
<b>Drs. Lewis Wright and Paul Wood Examining Apparatus</b> George S. Bause	:
The Last Known Image of Paul Meyer Wood, M.D. George S. Bause	1
<b>Drs. Betcher and Annis Formally Open the Wood Library-Museum in Park</b> <i>George S. Bause</i>	Ridge
■ REVIEWS OF EDUCATIONAL MATERIAL	:
■ CAREERS & EVENTS	

## INSTRUCTIONS FOR AUTHORS

The most recently updated version of the Instructions for Authors is available at www.anesthesiology.org. Please refer to the Instructions for the preparation of any material for submission to ANESTHESIOLOGY.

Manuscripts submitted for consideration for publication must be submitted in electronic format. The preferred method is via the Journal's Web site (http://www.anesthesiology.org). Detailed directions for submissions and the most recent version of the Instructions for Authors can be found on the Web site (http://www.anesthesiology.org). Books and educational materials should be sent to Michael J. Avram, Ph.D., Department of Anesthesiology, Northwestern University Feinberg School of Medicine, Ward Memorial Building, Room 13-199, 303 East Chicago Avenue, Chicago, IL60611-3008. Requests for permission to duplicate materials published in Anesthesiology should be submitted in electronic format, to the Permissions Department (journalpermissions@lww.com). Advertising and related correspondence should be addressed to Advertising Manager, Anesthesiology, Lippincott Williams & Wilkins, Two Commerce Square, 2001 Market Street, Philadelphia, Pennsylvania 19103 (Web site: http://www.lww.com/advertisingratecards/). Publication of an advertisement in Anesthesiology does not constitute endorsement by the Society or Lippincott Williams & Wilkins, Inc. of the product or service described therein or of any representations made by the advertiser with respect to the product or service.

ANESTHESIOLOGY (ISSN 0003-3022) is published monthly by Lippincott Williams & Wilkins, 16522 Hunters Green Parkway, Hagerstown, MD 21740-2116. Business office: Two Commerce Square, 2001 Market Street, Philadelphia, PA 19103. Periodicals postage paid at Hagerstown, MD, and at additional mailing offices. Copyright © 2013, the American Society of Anesthesiologists, Inc.

Annual Subscription Rates: United States—\$719 Individual, \$1309 Institution, \$289 In-training. Rest of World—\$759 Individual, \$1454 Institution, \$289 In-training. Single copy rate \$126. Subscriptions outside of North America must add \$52 for airfreight delivery. Add state sales tax, where applicable. The GST tax of 7% must be added to all orders shipped to Canada (Lippincott Williams & Wilkins' GST Identification #895524239, Publications Mail Agreement #1119672). Indicate in-training status and name of institution. Institution rates apply to libraries, hospitals, corporations, and partnerships of three or more individuals. Subscription prices outside the United States must be prepaid. Prices subject to change without notice. Subscriptions will begin with currently available issue unless otherwise requested. Visit us online at www.lvw.com.

Individual and in-training subscription rates include print and access to the online version. Online-only subscriptions for individuals (\$245) and persons in training (\$245) are available to nonmembers and may be ordered by downloading a copy of the Online Subscription FAXback Form from the Web site, completing the information requested, and faxing the completed form to 301-223-2400/44 (0) 20 7981 0535. Institutional rates are for print only; online subscriptions are available via Ovid. Institutions can choose to purchase a print and online subscription together for a discounted rate. Institutions that wish to purchase a print subscription, please contact Lippincott Williams & Wilkins, 16522 Hunters Green Parkway, Hagerstown, MD 21740-2116; phone: 1-800-638-3030 (outside the United States 301-223-2300/44 (0) 20 7981 0535. Institutions that wish to purchase an online subscription or online with print, please contact the Ovid Regional Sales Office near you or visit www.ovid.com/site/index.jsp and select Contact and Locations.

Address for non-member subscription information, orders, or change of address: Lippincott Williams & Wilkins, 16522 Hunters Green Parkway, Hagerstown, MD 21740-2116; phone: 1-800-638-3030 (outside the United States 301-223-2300/44 (0) 20 7981 0535; email: customerservice@lww.com. In Japan, contact LWW Japan Ltd., 3-23-14 Hongo, Bunkyo-ku, Tokyo 113, Japan; phone: 81-3-5689-5400;fax:81-3-5689-5402;email: bclaim@lwwis.co.jp. InBangladesh, India, Nepal, Pakistan, and Srī Lanka, contact Globe Publications Pvt. Ltd., B-13 3rd Floor, A Block, Shopping Complex, Naraina, Vihar, Ring Road, New Delhi 110028, India; phone: 91-11-25770411; fax: 91-11-25778876; email: info@globepub.com.

Address for member subscription information, orders, or change of address: Members of the American Society of Anesthesiologists receive the print and online journal with their membership. To become a member or provide a change of address, please contact the American Society of Anesthesiologists, 520 N. Northwest Highway, Park Ridge, IL 60068-2573; phone: 847-825-5586; fax: 847-825-1692; email: membership@ASAhq. org. For all other membership inquiries, contact Lippincott Williams & Wilkins Customer Service Department, P.O. Box 1580, Hagerstown, MD 21741-1580; phone: 1-800-638-3030 (outside the United States 301-223-2300/44 (0) 20 7981 0525); fax: 301-223-2400/44 (0) 20 7981 0535; email: memberservice@lww.com.

Postmaster: Send address changes to ANESTHESIOLOGY, P.O. BOX 1550, Hagerstown, MD 21740.

Advertising: Please contact Michelle Smith, Senior Account Manager, Advertising, Lippincott Williams & Wilkins, 333 Seventh Avenue, 19th Floor, New York, NY 10001; tel: (646) 674-6537, fax: (646) 607-5479, e-mail: Michelle.Smith@wolterskluwer.com. For classified advertising Representative, Lippincott Williams & Wilkins, Two Commerce Square, 2001 Market Street, Philadelphia, PA 19103; tel: (215) 521-8501, fax: (215) 689-2453. e-mail: Keida.Spurlock@wolterskluwer.com.