



## ON THE COVER:

Acute kidney injury (AKI) remains a major cause of postoperative morbidity and patients with preoperative hypoalbuminemia may be at higher risk. In this issue of ANESTHESIOLOGY, Lee and colleagues demonstrate that immediate preoperative administration of 20% albumin solution reduced the incidence of AKI after off-pump coronary artery bypass surgery.

- Lee *et al.*: Effect of Exogenous Albumin on the Incidence of Postoperative Acute Kidney Injury in Patients Undergoing Off-pump Coronary Artery Bypass Surgery with a Preoperative Albumin Level of Less Than 4.0 g/dl, p. 1001
- Jiang and Shaw: Albumin Supplementation as a Therapeutic Strategy in Cardiac Surgery: Useful Tool or Expensive Hobby?, p. 983

◆ THIS MONTH IN ANESTHESIOLOGY	1A
■ SCIENCE, MEDICINE, AND THE ANESTHESIOLOGIST	19A
■ INFOGRAPHICS IN ANESTHESIOLOGY	21A
◆ EDITORIAL VIEWS	
<b>Albumin Supplementation as a Therapeutic Strategy in Cardiac Surgery: Useful Tool or Expensive Hobby?</b>	983
<i>Y. Jiang and A. D. Shaw</i>	
<b>A Slick Way Volatile Anesthetics Reduce Myocardial Injury</b>	986
<i>N.-M. Wagner, E. R. Gross, and H. H. Patel</i>	
<b>Do You Believe What You See or What You Hear?: Ultrasound <i>versus</i> Stethoscope for Perioperative Clinicians</b>	989
<i>S. Isono, W. S. Sandberg, and Y. Jiang</i>	
<b>Is Chemotherapy-induced Peripheral Neuropathy More Than Just a Peripheral Nervous System Disorder?</b>	992
<i>P. M. Dougherty</i>	
<b>Molecular Interaction between Stress and Pain</b>	994
<i>P. Flood and J. D. Clark</i>	
<b>Ensuring the Future of the Specialty: What Is the Best Strategy to Ensure a Pipeline of Physician-scientists?</b>	996
<i>L. A. Fleisher and J. P. Wiener-Kronish</i>	
<b>Reporting of Observational Research in Anesthesiology: The Importance of the Analysis Plan</b>	998
<i>J. C. Eisenach, S. Kheterpal, and T. T. Houle</i>	



<p>◆ Refers to This Month in Anesthesiology</p> <p>◆ Refers to Editorial Views</p> <p> This article has an Audio Podcast</p>	<p> See Supplemental Digital Content</p> <p> CME Article</p> <p> This article has a Video Abstract</p>
--	--

## ■ PERIOPERATIVE MEDICINE

## CLINICAL SCIENCE

- ◆◆🌐 **Effect of Exogenous Albumin on the Incidence of Postoperative Acute Kidney Injury in Patients Undergoing Off-pump Coronary Artery Bypass Surgery with a Preoperative Albumin Level of Less Than 4.0 g/dl** 1001  
*E.-H. Lee, W.-J. Kim, J.-Y. Kim, J.-H. Chin, D.-K. Choi, J.-Y. Sim, S.-J. Choo, C.-H. Chung, J.-W. Lee, and I.-C. Choi*
- Administration of 20% exogenous albumin immediately before surgery significantly reduces the risk of acute kidney injury after off-pump coronary artery bypass surgery in patients with a preoperative serum albumin level of less than 4.0 g/dl. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*
- ◆◆🌐 **Auscultation versus Point-of-care Ultrasound to Determine Endotracheal versus Bronchial Intubation: A Diagnostic Accuracy Study** 1012  
*D. Ramsingh, E. Frank, R. Haughton, J. Schilling, K. M. Gimenez, E. Banh, J. Rinehart, and M. Cannesson*
- This prospective, randomized, double-blinded, crossover trial compared the accuracy of detecting bronchial intubation between point-of-care ultrasound and auscultation in 42 adult subjects. The point-of-care ultrasound was a reliable technique to detect bronchial intubation by demonstrating absent contralateral pleural lung sliding on the unintubated side. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*
- 🌐 **Fibrin Network Changes in Neonates after Cardiopulmonary Bypass** 1021  
*A. C. Brown, R. H. Hannan, L. H. Timmins, J. D. Fernandez, T. H. Barker, and N. A. Guzzetta*
- Clots formed from blood samples collected from 10 neonates after cardiopulmonary bypass were more porous than clots formed from samples collected before surgery. Clots formed from purified fibrinogen from neonates alone or mixed with adult fibrinogen were less dense than adult clots, suggesting that transfusion of adult fibrinogen may be less effective in neonates than in adults. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*
- CME ◆◆🌐 **Severe Nausea and Vomiting in the Evaluation of Nitrous Oxide in the Gas Mixture for Anesthesia II Trial** 1032  
 *P. S. Myles, M. T. V. Chan, J. Kasza, M. J. Paech, K. Leslie, P. J. Peyton, D. I. Sessler, G. Haller, W. S. Beattie, C. Osborne, J. R. Sneyd, and A. Forbes*
- Nitrous oxide increased the risk of severe postoperative nausea and vomiting, more so in Asian subjects; the effect was eliminated by pretreatment with an antiemetic. Severe postoperative nausea and vomiting was associated with fever, poor quality of recovery, and increased hospital stay, indicating that its prevention is clinically important. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*
- ◆◆🌐 **Tapered-cuff Endotracheal Tube Does Not Prevent Early Postoperative Pneumonia Compared with Spherical-cuff Endotracheal Tube after Major Vascular Surgery: A Randomized Controlled Trial** 1041  
*A. Monsel, Q. Lu, M. L. Corre, H. Brisson, C. Arbelot, C. Vezinet, M.-H. Fléron, C. Ibanez-Estève, F. Zerimech, M. Balduyck, F. Dexheimer, C. Wang, O. Langeron, and J.-J. Rouby*
- Polyvinyl chloride tapered-cuff endotracheal tubes did not lower the postoperative pneumonia frequency after major vascular surgery. Higher tapered-cuff–pressure variability and higher percentage of time with cuff overinflation were documented. The potential clinical impact of such findings warrants further evaluation. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*
- ◆ **Adductor Canal Block Provides Noninferior Analgesia and Superior Quadriceps Strength Compared with Femoral Nerve Block in Anterior Cruciate Ligament Reconstruction** 1053  
*F. W. Abdallah, D. B. Whelan, V. W. Chan, G. A. Prasad, R. V. Endersby, J. Theodoropoulos, S. Oldfield, J. Oh, and R. Brull*

In a randomized trial of 100 subjects undergoing anterior cruciate ligament, analgesia from adductor canal block was not inferior to that of femoral nerve block, but quadriceps muscle strength was superior.

## BASIC SCIENCE

- ◆◆🌐 **Cardiac *Slo2.1* Is Required for Volatile Anesthetic Stimulation of K<sup>+</sup> Transport and Anesthetic Preconditioning** 1065  
*A. P. Wojtovich, C. O. Smith, W. R. Urciuoli, Y. T. Wang, X.-M. Xia, P. S. Brookes, and K. Nehrke*

The authors have used novel gene-deleted mice to demonstrate that K<sup>+</sup> flux *via* the K<sub>Na</sub> Slick channel encoded by the *Slo2.1* gene is required for anesthetic preconditioning in mice. The identification of the role for Slick in anesthetic preconditioning will drive further development of novel cardiac-protective strategies and drugs for the clinical setting. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*

## ■ CRITICAL CARE MEDICINE

## CLINICAL SCIENCE

- Infusion System Architecture Impacts the Ability of Intensive Care Nurses to Maintain Hemodynamic Stability in a Living Swine Simulator** 1077  
*M. J. Pezone, R. A. Peterfreund, M. Y. Maslov, R. R. Govindaswamy, and M. A. Lovich*

We investigated the ability of skilled intensive care unit registered nurses to overcome pharmacologic delays caused by large infusion system common volumes in a swine model. The data suggest that smaller common volume leads to better hemodynamic control.

## BASIC SCIENCE

- 🌐 **Classically Activated Macrophages Protect against Lipopolysaccharide-induced Acute Lung Injury by Expressing Amphiregulin in Mice** 1086  
*Y. Xu, C. Meng, G. Liu, D. Yang, L. Fu, M. Zhang, Z. Zhang, H. Xia, S. Yao, and S. Zhang*

Amphiregulin was expressed in alveolar macrophages after acute lung injury. Exogenous amphiregulin protected, whereas amphiregulin antibodies exacerbated lung injury. The results are consistent with the notion up-regulation of amphiregulin in activated alveolar macrophages can exert a protective effect on the lung tissue in a model of acute lung injury. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*

- 🌐 **Mechanical Power and Development of Ventilator-induced Lung Injury** 1100  
*M. Cressoni, M. Gotti, C. Chiurazzi, D. Massari, I. Algieri, M. Amini, A. Cammaroto, M. Brioni, C. Montaruli, K. Nikolla, M. Guanzioli, D. Dondossola, S. Gatti, V. Valerio, G. L. Vergani, P. Pugin, P. Cadringer, N. Gagliano, and L. Gattinoni*

Twenty-four anesthetized piglets ventilated with a range of tidal volume and respiratory rate developed widespread lung injury above a threshold of 12 J/min. This finding suggests that mechanical power applied may be taken into account for ventilator-induced lung injury prevention. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*

## ■ PAIN MEDICINE

## BASIC SCIENCE

- ◆ **Cerebrospinal Fluid Oxaliplatin Contributes to the Acute Pain Induced by Systemic Administration of Oxaliplatin** 1109  
*Z.-Z. Huang, D. Li, H.-D. Ou-Yang, C.-C. Liu, X.-G. Liu, C. Ma, J.-Y. Wei, Y. Liu, and W.-J. Xin*
- ◆🌐 **Persistent Catechol-*O*-methyltransferase-dependent Pain Is Initiated by Peripheral β-Adrenergic Receptors** 1122  
*B. P. Ciszek, S. C. O'Buckley, and A. G. Nackley*

The administration of oxaliplatin to rats leads to nociceptive sensitization and the accumulation of the drug in cerebrospinal fluid. Oxaliplatin may support sensitization of spinal cord neurons through an epigenetic mechanism resulting in the up-regulation of CX3CL1.

In rats, sustained administration of a catecholamine-*O*-methyltransferase inhibitor produces hypersensitivity to mechanical and thermal stimuli, which is prevented by peripheral, but not spinal or supraspinal, administration of β-adrenoceptor antagonists, suggesting a peripheral site of action. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*

-  **Protein Kinase C  $\gamma$  Interneurons Mediate C-fiber–induced Orofacial Secondary Static Mechanical Allodynia, but Not C-fiber–induced Nociceptive Behavior** 1136  
*C. Peirs, N. Bourgois, A. Artola, and R. Dallel*

Static mechanical allodynia was associated with the activation of interneurons in laminae I-II and II-III. Among them were many protein kinase C (PKC)  $\gamma$ -expressing cells of inner lamina II (IIi).  $\gamma$ -Aminobutyric acid receptor type A (GABA<sub>A</sub>) antagonism or reactive oxidative species (ROS) generation are sufficient to induce static mechanical allodynia. GABA<sub>A</sub> agonism, PKC $\gamma$  inhibition, and ROS scavengers prevented static mechanical allodynia. The data are consistent with the premise that sensitization of PKC $\gamma$  interneurons in lamina IIi is required for static mechanical allodynia and that this sensitization is driven by ROS and GABA<sub>A</sub>ergic disinhibition. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*

- Quaternary Lidocaine Derivative QX-314 Activates and Permeates Human TRPV1 and TRPA1 to Produce Inhibition of Sodium Channels and Cytotoxicity** 1153  
*T. Stueber, M. J. Eberhardt, C. Hadamitzky, A. Jangra, S. Schenk, F. Dick, C. Stoetzer, K. Kistner, P. W. Reeh, A. M. Binshtok, and A. Leffler*

In cells expression human TRPV1 and TRPA1 channels, QX-314 activates both channels and enters the cell to inhibit sodium currents. In these cells, QX-314 produces cytotoxicity by a mechanism dependent on TRPV1 channels.

## ■ EDUCATION

### IMAGES IN ANESTHESIOLOGY

- Harlequin Phenomenon in a Newborn after Induction of General Anesthesia** 1166  
*A. Pekurovsky and M. P. Monteleone*

- Cerebral Fat Embolism Syndrome** 1167  
*S. T. Herway, J. Slotto, E. Harlan, and B. Newhouse*

### ORIGINAL INVESTIGATIONS IN EDUCATION

-  **Evaluation of the Foundation for Anesthesia Education and Research Medical Student Anesthesia Research Fellowship Program Participants' Scholarly Activity and Career Choices** 1168  
*P. Toledo, S. McLean, L. Duce, C. A. Wong, A. Schubert, and D. S. Ward*

Thirty percent of all the Medical Student Anesthesia Research Fellowship participants were authors on a subsequent publication. Among participants for whom residency information was available, 58% matched into an anesthesiology program.

### REVIEW ARTICLE

-  **Neural Control of Inflammation: Implications for Perioperative and Critical Care** 1174  
*B. E. Steinberg, E. Sundman, N. Terrando, L. I. Eriksson, and P. S. Olofsson*

Neural reflexes modulate systemic inflammation in clinical conditions encountered in perioperative and critical care. This review discusses how recent studies in this area are leading to new therapeutic strategies for the treatment of inflammatory diseases.

### MIND TO MIND

- Little Black Boxes** 1190  
*B. T. Bradley*

## CONTENTS

### ■ CORRESPONDENCE

**Suboptimal Diagnostic Accuracy of Obstructive Sleep Apnea in One Database Does Not Invalidate Previous Observational Studies** 1192

*J. Poeran, C. Cozowicz, F. Chung, B. Mokhlesi, S.-K. Ramachandran, and S. G. Memtsoudis*

**In Reply**

*D. I. McIsaac and C. van Walraven*

---

**Keeping It Clean: Appropriate Hospital Attire** 1193

*D. Wlody*

**In Reply**

*J. P. Rathmell*

---

**Cardiovascular Implantable Electronic Device Service as an Anesthesia Service** 1194

*J. R. Berris*

**In Reply**

*G. A. Rooke, S. A. Lombaard, G. A. V. Norman, J. Dziarski, K. M. Natrajan, L. W. Larson, and J. E. Poole*

---

**Predilection for Poor Prediction with the Surgical Apgar Score** 1195

*J. A. Hyder*

**In Reply**

*M. A. Terekhov, J. M. Ehrenfeld, and J. P. Wanderer*

---

**Arterial Pressure and Cardiopulmonary Bypass** 1197

*A. E. Schwartz*

**In Reply**

*J. Chui, L. Meng, and A. W. Gelb*

### ■ ANESTHESIOLOGY REFLECTIONS FROM THE WOOD LIBRARY-MUSEUM

**Colton's Mass Publication of *The Court of Death* by Peale** 988

*George S. Bause*

**Peale's Central Figures in *The Court of Death*: Death, the Corpse, Old Age, and Faith** 1052

*George S. Bause*

**Blade Bearer to *The Court of Death*: Peale's Warrior ... and Colton's Surgeon?** 1076

*George S. Bause*

**Portrayed by Peale, Would "Apoplexy" Haunt Colton's Near-asphyxial Anesthetics?** 1099

*George S. Bause*

## CONTENTS

### ■ REVIEWS OF EDUCATIONAL MATERIAL

1199

### ■ ERRATUM

#### **Residual Neuromuscular Block in the Elderly: Incidence and Clinical Implications: Erratum**

1201

#### **Major Adverse Events and Relationship to *Nil per Os* Status in Pediatric Sedation/Anesthesia outside the Operating Room: A Report of the Pediatric Sedation Research Consortium: Erratum**

1202

### ■ ANNOUNCEMENTS

1203

### ■ CAREERS & EVENTS

23A

## INSTRUCTIONS FOR AUTHORS

The most recently updated version of the Instructions for Authors is available at [www.anesthesiology.org](http://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 Alan Jay Schwartz M.D., M.S.Ed., Director of Education, Department of Anesthesiology and Critical Care Medicine, The Children's Hospital of Philadelphia, 34th Street and Civic Center Blvd., Room 9327, Philadelphia, Pennsylvania 19104-4399. Requests for permission to duplicate materials published in ANESTHESIOLOGY should be submitted in electronic format, to the Permissions Department ([journalpermissions@lww.com](mailto: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.wkadcenter.com/>). 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 © 2016, the American Society of Anesthesiologists, Inc.

**Annual Subscription Rates:** *United States*—\$835 Individual, \$1714 Institution, \$335 In-training. *Rest of World*—\$881 Individual, \$1904 Institution, \$335 In-training. Single copy rate \$152. Subscriptions outside of North America must add \$53 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.lww.com](http://www.lww.com).

Individual and in-training subscription rates include print and access to the online version. Online-only subscriptions for individuals (\$285) and persons in training (\$285) 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 0525); fax: 301-223-2400/44 (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](http://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 0525); fax: 301-223-2400/44 (0) 20 7981 0535; email: [customerservice@lww.com](mailto: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](mailto:bclaim@lwwis.co.jp). In Bangladesh, India, Nepal, Pakistan, and Sri 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](mailto: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, 1061 American Lane, Schaumburg, Illinois 60173-4973; phone: 847-825-5586; fax: 847-825-1692; email: [membership@ASAhp.org](mailto:membership@ASAhp.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](mailto:memberservice@lww.com).

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

**Advertising:** Please contact Mike Prinzi, Field Sales Rep, Medical Journals, Lippincott Williams & Wilkins, 333 Seventh Avenue, 19th Floor, New York, NY 10001; tel: (800) 933-6525, fax: (646) 607-5479, e-mail: [Mike.Prinzi@wolterskluwer.com](mailto:Mike.Prinzi@wolterskluwer.com). For classified advertising: Keida Spurlock, Recruitment 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](mailto:Keida.Spurlock@wolterskluwer.com).