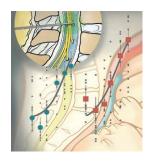
# ANESTHESIOLOGY





#### ON THE COVER:

Norepinephrine is a potential alternative to phenylephrine for maintaining blood pressure during spinal anesthesia for cesarean delivery with the advantage of less depression of maternal heart rate and cardiac output. In this issue of ANESTHESIOLOGY, Ngan Kee demonstrates the relative potencies of these two vasopressors in this context. The estimated dose equivalent to phenylephrine 100 µg was norepinephrine 8 µg.

• Ngan Kee: A Random-allocation Graded Dose-Response Study of Norepinephrine and Phenylephrine for Treating Hypotension during Spinal Anesthesia for Cesarean Delivery, p. 934

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#### **■** PERIOPERATIVE MEDICINE

#### **CLINICAL SCIENCE**

🔷 🔷 🌐 Effect of Xenon Anesthesia Compared to Sevoflurane and Total Intravenous Anesthesia for Coronary Artery Bypass Graft Surgery on Postoperative Cardiac Troponin Release: An International, Multicenter, Phase 3, Single-blinded, Randomized Noninferiority Trial

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J. Hofland, A. Ouattara, J.-L. Fellahi, M. Gruenewald, J. Hazebroucq, C. Ecoffey, P. Joseph, M. Heringlake, A. Steib, M. Coburn, J. Amour, B. Rozec, I. de Liefde, P. Meybohm, B. Preckel, J.-L. Hanouz, L. Tritapepe, P. Tonner, H. Benhaoua, J. P. Roesner, and B. Bein, for the Xenon-CABG Study Group

This randomized prospective study compared xenon-, sevoflurane-, and propofol-based anesthesia in patients undergoing elective on-pump coronary artery bypass graft surgery. With regard to postoperative cardiac troponin I release, xenon was noninferior to sevoflurane in low-risk, on-pump coronary artery bypass graft surgery patients. Only with xenon was cardiac troponin I release less than with total intravenous anesthesia. Xenon anesthesia appeared safe and feasible. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT

- Refers to This Month in Anesthesiology
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- ์ This article has an Audio Podcast



See Supplemental Digital Content



This article has a Video Abstract

$\Diamond$	A Random-allocation Graded Dose–Response Study of Norepinephrine and Phenylephrine f	or
(Same)	Treating Hypotension during Spinal Anesthesia for Cesarean Delivery W. D. Ngan Kee	934
	In this random-allocation, graded dose–response study, the relative potencies of the vasopressors were assessed by the proportion of full restoration of systolic blood pressure to the baseline in response to a bolus injection of one of six different doses of the vasopressors in 180 healthy patients undergoing spinal anesthesia for elective cesarean delivery. The estimated dose equivalent to phenylephrine 100 $\mu$ g was norepinephrine 7.6 $\mu$ g (95% CI, 6.3 to 9.6 $\mu$ g).	
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J. V. Roth
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L. K. Dunn and M. E. Durieux

### PAIN MEDICINE **CLINICAL SCIENCE** 🌣 🌐 Suprascapular and Interscalene Nerve Block for Shoulder Surgery: A Systematic Review and Meta-analysis 998 N. Hussain, G. Goldar, N. Ragina, L. Banfield, J. G. Laffey, and F. W. Abdallah A meta-analysis of 16 studies demonstrates suprascapular block results in 24-h morphine consumption and pain scores similar to interscalene block. Pain control may be better with interscalene blocks at 1 h postoperation. Suprascapular block is associated with fewer complications, in particular those that may limit the use of interscalene blocks in patients with obesity, sleep apnea, or pulmonary disease. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT ■ EDUCATION **IMAGES IN ANESTHESIOLOGY** Proper Positioning of an Impella 2.5 and CP Heart Pump 1014 B. B. Anderson and C. D. Collard Bilateral Upper Lobe Bronchi Originating from the Trachea 1015 K. A. Machovec, N. H. Greene, E. M. Raynor, and B. M. Taicher Long-axis Ultrasonic Images of the Pediatric Larynx and Trachea with a Cuffed **Endotracheal Tube** 1016 K. Kayashima, T. Doi, R. Yamasaki, and K. Imai **REVIEW ARTICLE** Stem Cell–based Therapies for Sepsis 1017 C. Keane, M. Jerkic, and J. G. Laffey Sepsis is a life-threatening syndrome resulting from microbial infection and is associated with an abnormal immune response and a mortality rate of 40%. Stem cells, particularly mesenchymal stem/stromal cells, offer considerable therapeutic potential for sepsis and may reduce sepsis severity via multiple mechanisms. Nevertheless, translational barriers exist that currently prevent realization of the therapeutic potential of mesenchymal stem/stromal cells for patients with sepsis. MIND TO MIND The Trip 1035 G. R. Strichartz CORRESPONDENCE Transfusion-associated Circulatory Overload or Degassing? 1037 C. Boucek In Reply D. J. Kor and L. Thalji Situations Where Intravenous Lidocaine Should Not Be Used as an Analgesic Adjunct? 1038

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