

The Journal of the American Society of Anesthesiologists, Inc.

American Society of Critical Care Anesthesiologists

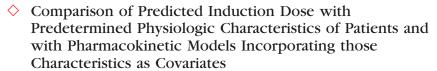
Society for Obstetric Anesthesia and Perinatology



CONTENTS THIS MONTH IN ANESTHESIOLOGY 5A Predicting Propofol Induction Rates Propofol Preservative May Play Role in Smokers' Airway Resistance During Intubation Practice Makes Perfect: Using Mannequins to Train for Cricothyroidotomy Do Elevated Tissue Glutamate Concentrations Shorten Duration of Local Anesthetics? **EDITORIAL VIEWS** Droperidol: Many Questions, Few Answers 289 Phillip E. Scuderi Do We Need Another Animal Pain Model? 291 Timothy J. Ness SPECIAL ANNOUNCEMENT Journal-sponsored Activities at the 2003 Annual Meeting: A Call for Abstracts **292** CLINICAL INVESTIGATIONS Antiemetic Prophylaxis for Office-based Surgery: Are the 5-HT₃ Receptor Antagonists Beneficial? 293 Jun Tang, Xiaoguang Chen, Paul F. White, Ronald H. Wender, Hong Ma, Alexander Sloninsky, Robert Naruse, Robert Kariger, Tom Webb, and Alan Zaentz The addition of a 5-HT₃ antagonist, ondansetron (4 mg intravenous) or dolasetron (12.5 mg intravenous), failed to improve the antiemetic efficacy of droperidol (0.625 mg intravenous) and dexamethasone (4 mg intravenous) when administered for routine prophylaxis in the office-based surgery setting.

Refers to This Month in Anesthesiology

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299

Tomiei Kazama, Koji Morita, Takehiko Ikeda, Tadayoshi Kurita, and Shigehito Sato

Predicting induction dose from predetermined physiologic characteristics of patients provides reasonable accuracy for young to middle-aged and elderly patients with both high and low administration rates of propofol. A previously reported pharmacokinetic model that incorporated patient characteristics provides the same accurate induction dose for a low rate.

Effects of Isoflurane on γ -Aminobutyric Acid Type A Receptors Activated by Full and Partial Agonists

306

Norbert Topf, Andrew Jenkins, Nicole Baron, and Neil L. Harrison

By studying a mutant γ -aminobutyric acid type A receptor with impaired gating, the authors were able to demonstrate that isoflurane can increase the efficacy of a partial agonist as well as increase agonist potency. These data suggest that the volatile anesthetic isoflurane exerts at least some of its effects on the γ -aminobutyric acid type A receptor via alterations in gating rather than simply changing binding or unbinding of the agonist.

Response Surface Modeling of Remifentanil-Propofol Interaction on Cardiorespiratory Control and Bispectral Index

312

Diederik J. F. Nieuwenhuijs, Erik Olofsen, Raymonda R. Romberg, Elise Sarton, Denham Ward, Frank Engbers, Jaap Vuyk, Rene Mooren, Luc J Teppema, and Albert Dahan

When given separately, remifentanil and propofol depress respiration in a dose-dependent fashion. When given in combination their effect on respiration is strikingly synergistic resulting in severe respiratory depression.

Effects of EDTA- and Sulfite-containing Formulations of Propofol on Respiratory System Resistance after Tracheal Intubation in Smokers

323

Petra Rieschke, Bonnie J LaFleur, and Piotr K. Janicki

The total respiratory system resistance in patients with smoking history is significantly elevated after induction with sulfite-containing than with EDTA-containing propofol formulation. The preservative used for propofol formulation may alter the effects of propofol on the total respiratory system resistance in smokers.



Intracranial Pressure and Cerebral Hemodynamic in Patients with Cerebral Tumors: A Randomized Prospective Study of Patients Subjected to Craniotomy in Propofol-Fentanyl, Isoflurane-Fentanyl, or Sevoflurane-Fentanyl Anesthesia

329

Kurt D. Petersen, Uffe Landsfeldt, Georg Emil Cold, Carsten B. Petersen, Søren Mau, John Hauerberg, Peter Holst, and Karsten Skovgaard Olsen

Intracranial pressure is lower and cerebral perfusion pressure is higher in patients subjected to propofol-fentanyl anesthesia compared with isoflurane-fentanyl or sevoflurane-fentanyl anesthesia.

Antifibrinolytic Therapy and Perioperative Blood Loss in Cancer Patients Undergoing Major Orthopedic Surgery

337

David Amar, Florence M. Grant, Hao Zhang, Patrick J. Boland, Denis H. Leung, and John A. Healey

In a double-blind, placebo-controlled study of 69 patients undergoing major orthopedic surgery for primary or metastatic disease, the authors determined that neither aprotinin nor epsilon amino-caproic acid administered at the start of surgery reduced perioperative blood loss or transfusion requirements.

Cardiopulmonary Bypass Decreases G Protein-Coupled Receptor Kinase Activity and Expression in Human Peripheral Blood Mononuclear Cells

343

Scott A. Hagen, Amy L. Kondyra, Hilary P. Grocott, Habib El-Moalem, Daniel Bainbridge, Joseph P. Mathew, Mark F. Newman, Joseph G. Reves, Debra A. Schwinn, and Madan M. Kwatra

The G protein-coupled receptor kinase (GRK) activity and expression in peripheral blood mononuclear cells is significantly decreased immediately after cardiopulmonary bypass at a time when plasma interleukin-6 is increased. The GRKs recover on postoperative day one but the recovery between patients is quite variable.

♦ What Is the Minimum Training Required for Successful Cricothyroidotomy?: A Study in Mannequins

349

David T. Wong, Atul J. Prabhu, Margarita Coloma, Ngozi Imasogie, and Frances F. Chung

Using mannequins, at least five cricothyroidotomy procedures must be performed to achieve proficiency in performing the procedure in 40 s or less.



The Parker Flex-Tip Tube <i>versus</i> a Standard Tube for
Fiberoptic Orotracheal Intubation: A Randomized
Double-blind Study

354

Michael S. Kristensen

During oral fiberoptic intubation, use of the Parker Flex-Tip tube is associated with a greater incidence of initial success of passage of the tube into the trachea when compared to a standard endotracheal tube.

Phonomyography as a Novel Method to Determine Neuromuscular Blockade at the Laryngeal Adductor Muscles: Comparison with the Cuff Pressure Method

359

Thomas M. Hemmerling, Denis Babin, and François Donati

Phonomyography and the cuff pressure method can be used interchangeably to determine neuromuscular blockade of the laryngeal adductor muscles. Phonomyography allows measurement of laryngeal blockade with the tracheal tube in the normal position.

LABORATORY INVESTIGATIONS

Effects of Isoflurane and Propofol on Glutamate and GABA Transporters in Isolated Cortical Nerve Terminals

364

Robert I. Westphalen and Hugh C. Hemmings, Jr.

Using three independent assays for glutamate and γ -aminobutyric acid transporters, isoflurane and propofol did not substantially affect uptake, synaptic membrane binding, or Ca²⁺-independent reverse transport of L-[³H]glutamate or [¹⁴C] γ -aminobutyric acid in isolated cortical nerve terminals. The presynaptic neuronal transporters of these principal excitatory and inhibitory central nervous system transmitters do not represent important anesthetic targets.

Hepatic Ischemia Is Associated with an Increase in Liver Parenchyma Nitric Oxide That Is in Part Enzyme-Independent

373

Franck Lhuillier, Pierre Parmantier, Joelle Goudable, Philippe Crova, Bertrand Delafosse, Guy Annat, Raymond Cespuglio, and Jean Paul Viale

Nitric oxide is present in liver parenchyma. Its generation is dramatically affected by an ischemia-reperfusion injury. The increased nitric oxide generation during local ischemia is, at least in part, independent of nitric oxide synthases.



Isoflurane Alters Energy Substrate Metabolism to Preserve Mechanical Function in Isolated Rat Hearts following Prolonged No-Flow Hypothermic Storage

379

Barry A. Finegan, Manoj Gandhi, Matthew R. Cohen, Donald Legatt, and Alexander S. Clanachan

Isoflurane enhances mechanical functional recovery and adenosine triphosphate content, and normalizes energy substrate metabolism in hearts subject to prolonged no-flow hypothermic arrest.

Preconditioning with Sevoflurane Reduces Changes in Nicotinamide Adenine Dinucleotide during Ischemia-Reperfusion in Isolated Hearts: Reversal by 5-Hydroxydecanoic Acid

387

Matthias L. Riess, Enis Novalija, Amadou K. S. Camara, Janis T. Eells, Qun Chen, and David F. Stowe

Anesthetic preconditioning protects mitochondrial function during cardiac ischemia as assessed by nicotinamide adenine dinucleotide fluorescence. These effects are reversed by 5-hydroxydecanoic acid.

Isoflurane Decreases ATP Sensitivity of Guinea Pig Cardiac Sarcolemmal K_{ATP} Channel at Reduced Intracellular pH

396

Anna Stadnicka and Zeljko J. Bosnjak

Intracellular pH appears to modulate direct interaction of isoflurane with cardiac $K_{\rm ATP}$ channel. At reduced pHi, isoflurane enhances channel opening by increasing Po and decreases channel sensitivity to inhibition by intracellular ATP.

Interaction of Isoflurane with the Dopamine Transporter

404

John Votaw, Michael Byas-Smith, Jian Hua, Ronald Voll, Laurent Martarello, Allan I. Levey, F. DuBois Bowman, and Mark Goodman

Experiments in monkeys, rats, and cells show that isoflurane causes dopamine transporters to be trafficked from the plasma membrane into the cytoplasm.



Despite *In Vitro* Increase in Cyclic Guanosine Monophosphate Concentrations, Intracarotid Nitroprusside Fails to Augment Cerebral Blood Flow of Healthy Baboons

412

Shailendra Joshi, Roger Hartl, Lena S. Sun, Adam D. Libow, Mei Wang, John Pile-Spellman, William L. Young, E. Sander Connolly, and Carol A. Hirshman

Intracarotid infusion sodium nitroprusside, in doses that on recirculation significantly decrease systemic arterial pressure, does not increase cerebral blood flow of anesthetized healthy baboons. However, *in vitro* proximal cerebral arterial segments obtained from the same animal species demonstrate dose-dependent increase cyclic guanosine monophosphate content. Collectively, these observations suggest that sodium nitroprusside could affect the tone of large cerebral arteries, but *in vivo* intraarterial sodium nitroprusside does not affect the tone of resistance arterioles.

Respiratory Depression by Tramadol in the Cat: Involvement of Opioid Receptors

420

Luc J. Teppema, Diederik Nieuwenhuijs, Cees N. Olievier, and Albert Dahan

The opioid receptor antagonist naloxone completely reversed the inhibiting effects of the analgesic tramadol on ventilatory control and prevented more than 50% of the respiratory depression after a single dose of tramadol in an anesthetized experimental cat model. This indicates that tramadol causes respiratory depression mainly *via* its action on opioid receptors.

The α_2 -Adrenoceptor Agonist Dexmedetomidine Converges on an Endogenous Sleep-promoting Pathway to Exert Its Sedative Effects

428

Laura E. Nelson, Jun Lu, Tianzhi Guo, Clifford B. Saper, Nicholas P. Franks, and Mervyn Maze

Evidence from immunohistochemistry, behavioral pharmacology, and discrete neuronal lesioning studies in rats indicates that the α_2 -adrenoceptor agonist dexmedetomidine activates endogenous NREM sleep-promoting pathways to exert its sedative action.

Thermogenesis Inhibition in Brown Adipocytes Is a Specific Property of Volatile Anesthetics

437

Kerstin B. E. Ohlson, Sten G. E. Lindahl, Barbara Cannon, and Jan Nedergaard

Inhibition of thermogenesis in brown adipocytes is a specific property of volatile anesthetics, as compared with both nonvolatile anesthetics and volatile nonanesthetics. This property is of significance for thermoregulatory studies and for body temperature control during anesthesia, and it implies that brown adipocytes possess cellular properties, making them potential model systems for elucidation of the molecular mechanism of anesthetics.



Ketamine and Midazolam Differentially Inhibit
Nonadrenergic Noncholinergic Lower Esophageal
Sphincter Relaxation in Rabbits: Role of Superoxide Anion
and Nitric Oxide Synthase

449

Atsushi Kohjitani, Takuya Miyawaki, Makoto Funahashi, Hitoshi Higuchi, Ryuji Matsuo, and Masahiko Shimada

Ketamine inhibits nitric oxide-mediated nonadrenergic noncholinergic lower esophageal sphincter relaxation *via* extracellular production of superoxide anion, whereas midazolam inhibits it *via* inhibiting nitric oxide synthase activity.

Supraspinal Antinociceptive Effects of μ and δ Agonists Involve Modulation of Adenosine Uptake

459

Thao Pham, Louis Carrega, Nicole Sauze, Odile Fund-Saunier, Christiane Devaux, Jean-Claude Peragut, Alain Saadjian, and Régis Guieu

This article discusses the effects of opioid agonist subtypes on adenosine uptake and the relation with analgesic effects.

Neuroprotective Effect of Urinary Trypsin Inhibitor against Focal Cerebral Ischemia-Reperfusion Injury in Rats

465

Toshiyuki Yano, Sakiko Anraku, Ryosuke Nakayama, and Kazuo Ushijima

Pretreatment with urinary trypsin inhibitor attenuates focal cerebral ischemiareperfusion injury when assessed by infarct size, neutrophil infiltration, and nitrotyrosine immunoreactivity in the ischemic hemisphere.

PAIN AND REGIONAL ANESTHESIA

Nociception in Persistent Pancreatitis in Rats: Effects of Morphine and Neuropeptide Alterations

474

Louis P. Vera-Portocarrero, Ying Lu, and Karin N. Westlund

Administration of dibutyltin dichloride produces inflammation of the pancreas and nociceptive-related behaviors that are attenuated by morphine.

Prospective Study on Incidence and Functional Impact of Transient Neurologic Symptoms Associated with 1% *versus* 5% Hyperbaric Lidocaine in Short Urologic Procedures

485

Doris Tong, Jean Wong, Frances Chung, Mark Friedlander, Joseph Bremang, Gabor Mezei, and David Streiner

There was no difference in the incidence of TNS (21% vs. 18%) between 1% versus 5% lidocaine. During the first 48 hours postop, a small proportion of patients who had TNS experienced clinically significant functional impairment of some of the activities of daily living.



 \Diamond

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Antinociceptive Effect of Low-Dose Intrathecal Neostigmine Combined with Intrathecal Morphine following Gynecologic Surgery Raquel A. Almeida, Gabriela R. Lauretti, and Anita L. Mattos	495
Low-dose intrathecal neostigmine enhanced the analgesic effect of intrathecal morphine following gynecologic surgery.	
High Spinal Anesthesia for Cardiac Surgery: Effects on β-Adrenergic Receptor Function, Stress Response, and Hemodynamics Trevor W. R. Lee, Hilary P. Grocott, Debra Schwinn, and Eric Jacobsohn,	499
for the Winnipeg High-Spinal Anesthesia Group High-dose intrathecal bupivacaine combined with general anesthesia attenuates atrial β-receptor dysfunction and down-regulation during routine coronary artery bypass graft surgery. Additionally, it results in decreased serum epinephrine, norepinephrine, and cortisol concentrations.	
Spinal Anesthesia: Functional Balance Is Impaired after Clinical Recovery Charles O. Imarengiaye, Dajun Song, Atul J. Prabhu, and Frances Chung	511
The authors compared clinical markers of gross motor recovery with objective data of functional balance after spinal anesthesia. The ability to walk without assistance after spinal anesthesia requires a longer recovery period than predicted by restoration of gross motor function.	
Indocyanine Green: Evidence of Neurotoxicity in Spinal Root Axons Friederike B. Dietz and Richard A. Jaffe	516
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Activation of Peripheral Excitatory Amino Acid Receptors Decreases the Duration of Local Anesthesia Brian E. Cairns, Giulio Gambarota, Patricia S. Dunning, Robert V. Mulkern, and Charles B. Berde	521

The duration of lidocaine afferent fiber blockade is shortened by activation of peripheral excitatory amino acid receptors, which are associated with afferent sensitization as well as increased tissue extracellular fluid volume and blood flow. These findings suggest that further attention should be directed toward the clinical utility of combinations of peripheral excitatory amino acid receptor antagonists and local anesthetics.



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Alain Borgeat, Georgios Ekatodramis, and Carlo A. Schenker Review of the problem of postoperative nausea and vomiting in regional

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REVIEW ARTICLE

Anesthesia: A Review

Computational Aspects of Anesthetic Action in Simple **Neural Models**

548

Allan Gottschalk and Paul Haney

Computational investigation of anesthetic action in mathematical descriptions of individual neurons and networks of neurons demonstrates how anesthetic modulation of ion channel activity might be transformed into more complex systems level behavior.

CLINICAL CONCEPTS AND COMMENTARY

Perioperative Considerations in the Patient with a Left Ventricular Assist Device

565

Alfred C. Nicolosi and Paul S. Pagel

This article briefly reviews perioperative considerations in the anesthetic management of the patient with end-stage heart failure who is chronically supported by a left ventricular assist device (LVAD). The pathophysiology of heart failure as it pertains to the LVAD patient is discussed, the features of commonly used devices are described, and the major perioperative issues in LVAD patients are characterized.

CASE REPORTS

Opioid "Holiday" Following Antagonist Supported Detoxification during General Anesthesia Improves Opioid Agonist Response in a Cancer Patient with Opioid Addiction

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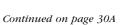
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Gerald A. Maccioli

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INSTRUCTIONS FOR AUTHORS

The Instructions for Authors are published in the January and July issues and are available at www.anesthesiology.org. Please refer to the Instructions for the preparation of any material for submission to Anesthesiology.

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