Lunchtime Drop-in Sessions

*All sessions last one hour*

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<th>October (12.00-13.00)</th>
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<tr>
<td>6th Fri    Statistics</td>
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<tr>
<td>9th Mon    Literature searching</td>
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<tr>
<td>17th Tues  Critical Appraisal</td>
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<tr>
<td>25th Wed   Statistics</td>
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<th>November (13.00-14.00)</th>
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<tr>
<td>2nd Thurs  Literature searching</td>
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<tr>
<td>10th Fri   Critical Appraisal</td>
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<td>13th Mon   Statistics</td>
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<td>21st Tues  Literature searching</td>
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<tr>
<td>29th Wed   Critical Appraisal</td>
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<th>December (12.00-13.00)</th>
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<td>7th Thurs  Statistics</td>
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<td>15th Fri   Literature searching</td>
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**Librarians on demand!**

Do you urgently need to find evidence to support your treatment of a patient? Would you like immediate information about a particular therapy, practice, condition, or other clinical need?

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## Updates

The Association of Anaesthetists of Great Britain and Ireland (AAGBI)

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<tr>
<td><strong>Major vascular injuries during lumbar disc surgery</strong></td>
<td>04 October 2017</td>
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<td><strong>First female President Elect for UK anaesthesia organisation</strong></td>
<td>28 September 2017</td>
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<tr>
<td><strong>Anaesthetists to cycle 220 miles from London to Liverpool to improve patient safety in Africa</strong></td>
<td>22 September 2017</td>
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<tr>
<td><strong>AAGBI and GAT Committee response to the Report from the UK Shape of Training Steering Group (UKSTSG)</strong></td>
<td>15 September 2017</td>
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**AAGBI Events:** [http://www.aagbi.org/education/events](http://www.aagbi.org/education/events)

**SAS seminar:** Tuesday 7th November 2017  Association of Anaesthetists  LONDON

**Challenges and solutions in the care of the obese parturient:** Wednesday 8th November 2017  Association of Anaesthetists  LONDON

**Management & leadership course:** Monday 13th November 2017 - Tuesday 14th November 2017  Association of Anaesthetists  LONDON

**Core Topics Leicester:** Friday 17th November 2017  Holiday Inn Leicester  LEICESTER

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**NICE National Institute for Health and care Excellence**

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<tr>
<th>Source</th>
<th>Date</th>
<th>Publisher</th>
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<tr>
<td><strong>Laparoscopic cholecystectomy under neuraxial anesthesia compared with general anesthesia: Systematic review and meta-analyses</strong></td>
<td>01 September 2017</td>
<td>Journal Of Clinical Anesthesia</td>
<td><a href="#">Read Summary</a></td>
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<tr>
<td><strong>How does any upright position compare with supine position for women in the second stage of labor without epidural anesthesia?</strong></td>
<td>20 September 2017</td>
<td>Cochrane Clinical Answers</td>
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<td><strong>Efficacy of dexmedetomidine on perioperative morbidity during nasal surgery: A meta-analysis</strong></td>
<td>25 September 2017</td>
<td>The Laryngoscope</td>
<td><a href="#">Read Summary</a></td>
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<td><strong>Effect of an Intravenous Dexamethasone Added to Caudal Local Anesthetics to Improve Postoperative Pain: A Systematic Review and Meta-Analysis With Trial Sequential Analysis</strong></td>
<td>12 September 2017</td>
<td>Anesthesia And Analgesia</td>
<td><a href="#">Read Summary</a></td>
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<tr>
<td><strong>The Effect of Early Use of Supplemental Therapy on Preventing Postherpetic Neuralgia: A</strong></td>
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**Systematic Review and Meta-analysis**
Source: PubMed - 01 September 2017 - Publisher: Pain Physician Read Summary

**Optimal Dose of Perineural Dexamethasone to Prolong Analgesia After Brachial Plexus Blockade: A Systematic Review and Meta-Analysis**
Source: PubMed - 14 September 2017 - Publisher: Anesthesia And Analgesia Read Summary

**Persistent postsurgical pain in children and young people: prediction, prevention, and management** [PDF]
Source: International Association for the Study of Pain - 01 September 2017 - Publisher: International Association for the Study of Pain (IASP) Read Summary

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**The Cochrane Library of Systematic Reviews**

- Postoperative epidural analgesia versus systemic analgesia for thoraco-lumbar spine surgery in children  
  Online Publication Date: October 2017
- Perioperative administration of buffered versus non-buffered crystalloid intravenous fluid to improve outcomes following adult surgical procedures  
  Online Publication Date: September 2017
- Heat and moisture exchangers versus heated humidifiers for mechanically ventilated adults and children  
  Online Publication Date: September 2017
- Simple aspiration versus intercostal tube drainage for primary spontaneous pneumothorax in adults  
  Online Publication Date: September 2017

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Click on the hyperlinked title (+ Ctrl) for contents. If you require any of the articles in full please email: library@uhbristol.nhs.uk

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- Anesthesiology
- British Journal of Anaesthesia
- Current Opinion in Anaesthesiology
Anaesthesia

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A Randomised Controlled Trial Of Placebo, Droperidol Or Ondansetron To Prevent Nausea And Vomiting After Tonsillectomy In Children Receiving Dexamethasone
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Ultrasound-Guided Block And The Incidence Of Intraneural Injection. A Reply
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Is The Erector Spinae Plane (ESP) Block A Sheath Block? A Reply
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‘Medicolegal’ Or ‘Patient-Centred’ Consent? A Reply

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Science, Medicine, And The Anesthesiologist Free

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Reviews Of Educational Material
Reviews Of Educational Material
A comparison of the recovery profiles of desflurane and isoflurane anesthesia in patients undergoing elective supratentorial craniotomy: A randomized controlled trial.

**Author(s):** Paul, Aparanjit P; Vedantam, Aditya; Korula, Grace; Chacko, Ari G

**Source:** Neurology India; 2017; vol. 65 (no. 5); p. 1053-1058

Available at [Neurology India](https://www.neurologyindia.org) - from EBSCO (MEDLINE Complete)

**Abstract:**

CONTEXT Few studies have compared recovery profiles of desflurane and isoflurane for patients undergoing elective supratentorial craniotomy. It is not known if the choice of inhalational agent can affect the duration of transient postoperative neurological deficits in these patients.

[ABSTRACT EDITED]

Training Surgeons and Anesthesiologists to Facilitate End-of-Life Conversations With Patients and Families: A Systematic Review of Existing Educational Models

**Author(s):** Bakke K.E.; Bader A.M.; Miranda S.P.; Castillo-Angeles M.; Lilley E.J.; Cooper Z.; Cauley C.E.; Bernacki R.; Urman R.D.

**Source:** Journal of Surgical Education; 2017

**Publication Type(s):** Article In Press

**Abstract:**

Objective: Despite caring for patients near the end-of-life (EOL), surgeons and anesthesiologists report low confidence in their ability to facilitate EOL conversations. This discrepancy exists despite competency requirements and professional medical society recommendations. The objective of this systematic review is to identify articles describing EOL communication training available to surgeons and anesthesiologists, and to assess their methodological rigor to inform future curricular design and evaluation.

[ABSTRACT EDITED]

Spinal Anesthesia and Spinal Anesthesia with Subdiaphragmatic Lidocaine in Shoulder Pain Reduction for Gynecological Laparoscopic Surgery: A Randomized Clinical Trial

**Author(s):** Asgari Z.; Rezaeinejad M.; Hosseini R.; Nataj M.; Razavi M.; Sepidarkish M.

**Source:** Pain Research and Management; 2017; vol. 2017

**Publication Type(s):** Article

Available at [Pain Research and Management](https://www.painresearchandmanagement.com) - from EBSCO (MEDLINE Complete)

**Abstract:**

Objective. The aim of this study was to compare the effectiveness of spinal anesthesia with subdiaphragmatic lidocaine at the beginning of surgery versus spinal anesthesia in pain reduction for gynecological laparoscopic surgery

[ABSTRACT EDITED]

Stable anesthesia with alternative to opioids: Are ketamine and magnesium helpful in stabilizing hemodynamics during surgery? A systematic review and meta-analyses of randomized controlled trials

**Author(s):** Forget P.; Cata J.

**Source:** Best Practice and Research: Clinical Anaesthesiology; 2017

**Abstract:**

Introduction: The role of ketamine and magnesium in improving postoperative pain and diminish opioid consumption has been largely described. Synthetic opioids are known to provide hemodynamic stability when given for major noncardiac surgery. Definitive evidence on the role of ketamine and/or magnesium on intraoperative hemodynamic control would support their potential as alternatives to opioids during surgery

[ABSTRACT EDITED]
Effects of propofol or sevoflurane anesthesia induction on hemodynamics in patients undergoing fiberoptic intubation for cervical spine surgery: A randomized, controlled, clinical trial

Author(s): Robba C.; Qeva E.; Borsellino B.; Aloisio S.; Tosti G.; Bilotta F.

Source: Journal of Anaesthesiology Clinical Pharmacology; 2017; vol. 33 (no. 2); p. 215-220

Publication Type(s): Article

Abstract: Background and Aims: In patients undergoing surgery for cervical myelopathy, induction of general anesthesia can induce systemic arterial hypotension that may worsen spinal cord hypoperfusion and precipitate spinal injury. In this randomized, controlled, clinical trial study, we compared the hemodynamic changes related to anesthesia induction with intravenous (IV) propofol- and sevoflurane-based inhalational induction in patients undergoing fiberoptic intubation for cervical spine surgery. [ABSTRACT EDITED]

Safety of non-anesthesia provider administered propofol sedation in non-advanced gastrointestinal endoscopic procedures: A meta-analysis

Author(s): Gouda B.; Gouda G.; Singh A.; Borle A.; Singh P.M.; Sinha A.

Source: Saudi Journal of Gastroenterology; 2017; vol. 23 (no. 3); p. 133-143

Available at Saudi Journal of Gastroenterology - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: Background/Aims: The aim of the study was to evaluate the safety of non-anesthesia provider (NAPP) administered propofol sedation in patients undergoing non-advanced gastrointestinal (GI) endoscopic procedures. [ABSTRACT EDITED]

Regional versus local anesthesia for arteriovenous fistula creation in end-stage renal disease: A systematic review and meta-analysis

Author(s): Ismail A.; Elgebaly A.; Abushouk A.I.; Bekhet A.H.; Abunar O.; Hassan O.; Khamis A.A.; Al-Sayed M.

Source: Journal of Vascular Access; 2017; vol. 18 (no. 3); p. 177-184

Publication Type(s): Review

Available at Journal of Vascular Access - from EBSCO (MEDLINE Complete)

Abstract: There is a consensus in the literature that regional anesthesia (RA) improves local hemodynamic parameters in comparison to local anesthesia (LA) during arteriovenous fistula (AVF) surgical construction. However, the effects of both techniques on fistula patency and failure rates are still controversial. The aim of this meta-analysis is to synthesize evidence from published randomized trials and observational studies regarding the safety and efficacy of RA versus LA in AVF surgical construction. [ABSTRACT EDITED]

Comparison of periarticular anesthesia with liposomal bupivacaine with femoral nerve block for pain control after total knee arthroplasty: A PRISMA-compliant meta-analysis

Author(s): Liu S.-Q.; Chen X.; Yu C.-C.; Weng C.-W.; Wu Y.-Q.; Xiong J.-C.; Xu S.-H.

Source: Medicine (United States); 2017; vol. 96 (no. 13)

Publication Type(s): Article

Available at Medicine (United States) - from Europe PubMed Central - Open Access

Abstract: Background: Periarticular anesthesia (PAI) with liposomal bupivacaine (LB) and femoral nerve block (FNB) were 2 common type of pain management after total knee arthroplasty (TKA). There is no consensus about PAI with LB shows better clinical outcome than FNB. Thus, we
performed a systematic review and meta-analysis to compare the efficacy and safety of PAI with LB and FNB for patients prepared for TKA. [ABSTRACT EDITED]

**Effect of different types of anesthesia on intraoperative blood glucose of diabetic patients: A PRISMA-compliant systematic review and meta-analysis**

**Author(s):** Li X.; Wang J.; Chen K.; Li Y.; Wang H.; Mu Y.; Chen Y.  
**Source:** Medicine (United States); 2017; vol. 96 (no. 13)  
**Publication Type(s):** Review  
Available at Medicine (United States) - from Europe PubMed Central - Open Access  
**Abstract:** Background: Systematic review which analyzes the impact of different anesthesia on intraoperative blood glucose levels of diabetes patients. [ABSTRACT EDITED]

**Midazolam vs. Meperidine plus Bupivacaine as spinal anaesthesia in woman undergoing caesarean surgery: Clinical trial study**

**Author(s):** Zakeri H.; Rajabi M.; Hosseinipour A.; Badpa M.; Abdollahi M.; Salehi S.  
**Source:** Biomedical Research (India); 2017; vol. 28 (no. 6); p. 2768-2772  
**Publication Type(s):** Article  
**Abstract:** Background: The rate of caesarean section has risen from less than 7% in 1970s to more than 25% in 2003. Objective: Due to the side effects of caesarean operation as well as the vital cares needed in this procedure, the raise in the ratio has expressed the technique as a matter of global concern. [ABSTRACT EDITED]

**Dexmedetomidine prevent postoperative nausea and vomiting on patients during general anesthesia: A PRISMA-compliant meta analysis of randomized controlled trials**

**Author(s):** Jin S.; Liang D.D.; Chen C.; Zhang M.; Wang J.  
**Source:** Medicine (United States); 2017; vol. 96 (no. 1)  
**Publication Type(s):** Review  
Available at Medicine (United States) - from Europe PubMed Central - Open Access  
**Abstract:** Background: Postoperative nausea and vomiting (PONV) is a frequent complication in postoperative period. The aim of this article was to evaluate the effect of dexmedetomidine on PONV. [ABSTRACT EDITED]

**Cervical plexus anesthesia versus general anesthesia for anterior cervical discectomy and fusion surgery: A randomized clinical trial**

**Author(s):** Wang H.; Ma L.; Yang D.; Wang T.; Ding W.; Wang Q.; Zhang L.  
**Source:** Medicine (United States); 2017; vol. 96 (no. 7)  
**Publication Type(s):** Article  
Available at Medicine (United States) - from Europe PubMed Central - Open Access  
**Abstract:** Both general anesthesia (GA) and cervical plexus anesthesia (CPA) can be used for anterior cervical discectomy and fusion (ACDF) surgery. The aim of this study was to evaluate the influence of anesthetic techniques on perioperative mortality and morbidity in patients undergoing cervical surgery. [ABSTRACT EDITED]

**Comparison of the pro-postoperative analgesia of intraoperative dexmedetomidine with and without loading dose following general anesthesia: A prospective, randomized, controlled clinical trial**

**Author(s):** Fan W.; Zhang J.; Li G.; Zheng Y.; Liu Y.; Yang H.; Sun Y.
Intraoperative dexmedetomidine (DEX) with or without loading dose is well-established to improve postoperative pain control in patient-controlled analgesia (PCA). This study was designed to compare the pro-analgesia effect between the 2 in patients received general anesthesia.

Reply to Hoegberg et al.: letter in response to "lipid emulsion improves survival in animal models of local anesthetic toxicity: a meta-analysis".


Prophylactic atropine administration attenuates the negative haemodynamic effects of induction of anaesthesia with propofol and high-dose remifentanil: A randomised controlled trial.
**Source:** European journal of anaesthesiology; Oct 2017; vol. 34 (no. 10); p. 695-701

**Publication Type(s):** Journal Article

**Abstract:** BACKGROUND Induction of anaesthesia with propofol and remifentanil often induces unwanted bradycardia and hypotension, raising concerns regarding tissue oxygenation. The electrophysiological cardiac effects of remifentanil can be reversed by atropine. OBJECTIVE To investigate if prophylactic administration of atropine can attenuate the negative haemodynamic effects of propofol and a high dose of remifentanil during induction of anaesthesia. [ABSTRACT EDITED]

**A Flawed Meta-analysis? Similar Risk of Cardiopulmonary Adverse Events Between Propofol and Traditional Anesthesia for Gastrointestinal Endoscopy.**

**Author(s):** Hoaglin, David C

**Source:** Clinical gastroenterology and hepatology : the official clinical practice journal of the American Gastroenterological Association; Oct 2017; vol. 15 (no. 10); p. 1640

**Publication Type(s):** Letter

**Abstract:** BACKGROUND Xenon was shown to cause less hemodynamic instability and reduce vasopressor needs during off-pump coronary artery bypass (OPCAB) surgery when compared with conventionally used anesthetics. As xenon exerts its organ protective properties even in subanesthetic concentrations, we hypothesized that in patients undergoing OPCAB surgery, 30% xenon added to general anesthesia with propofol results in superior hemodynamic stability when compared to anesthesia with propofol alone. [ABSTRACT EDITED]

**Thermal suit in preventing unintentional intraoperative hypothermia during general anaesthesia: a randomized controlled trial.**

**Author(s):** Lauronen, S-L; Kalliomäki, M-L; Aho, A J; Kalliovalkama, J; Riikonen, J M; Mäkinen, M-T; Leppikangas, H M;

**Source:** Acta anaesthesiologica Scandinavica; Oct 2017; vol. 61 (no. 9); p. 1133-1141

**Publication Type(s):** Journal Article

**Abstract:** BACKGROUND Unintentional perioperative hypothermia causes serious adverse effects to surgical patients. Thermal suit (T-Balance®) is an option for passive warming perioperatively. We hypothesized that the thermal suit will not maintain normothermia more efficiently than conventional cotton clothes when also other preventive procedures against unintentional hypothermia are used. [ABSTRACT EDITED]

**A systematic review of near real-time and point-of-care clinical decision support in anesthesia information management systems**

**Author(s):** Simpao A.F.; Tan J.M.; Lingappan A.M.; Galvez J.A.; Morgan S.E.; Krall M.A.

**Source:** Journal of Clinical Monitoring and Computing; Oct 2017; vol. 31 (no. 5); p. 885-894

**Publication Type(s):** Review

**Available at Journal of Clinical Monitoring and Computing - from EBSCO (MEDLINE Complete)**
Abstract: Anesthesia information management systems (AIMS) are sophisticated hardware and software technology solutions that can provide electronic feedback to anesthesia providers. This feedback can be tailored to provide clinical decision support (CDS) to aid clinicians with patient care processes, documentation compliance, and resource utilization. We conducted a systematic review of peer-reviewed articles on near real-time and point-of-care CDS within AIMS using the Preferred Reporting Items for Systematic Review and Meta-Analysis Protocols. [ABSTRACT EDITED]


Author(s): Pérez-González, Oscar; Cuéllar-Guzmán, Luis F; Soliz, José; Cata, Juan P
Source: Regional anesthesia and pain medicine; Sep 2017
Publication Type(s): Journal Article

Abstract: BACKGROUND AND OBJECTIVES The perioperative period is critical in the long-term prognosis of breast cancer patients. The use of regional anesthesia, such as paravertebral block (PVB), could be associated with improvements in long-term survival after breast cancer surgery by modulating the inflammatory and immune response associated with the surgical trauma, reducing opioid and general anesthetic consumption, and promoting cancer cells death by a direct effect of local anesthetics. [ABSTRACT EDITED]

Is local anaesthesia a favourable approach for transcatheter aortic valve implantation? A systematic review and meta-analysis comparing local and general anaesthesia.

Author(s): Ehret, Constanze; Rossaint, Rolf; Foldenauer, Ann Christina; Stoppe, Christian; Stevanovic, Ana;
Source: BMJ open; Sep 2017; vol. 7 (no. 9); p. e016321
Publication Type(s): Journal Article
Available at BMJ open - from HighWire - Free Full Text

Abstract: OBJECTIVES We conducted a systematic review and meta-analysis to identify the potential favourable effects of local anaesthesia plus sedation (LAS) compared with general anaesthesia (GA) in transcatheter aortic valve implantation (TAVI). [ABSTRACT EDITED]

Effect of clonidine on the efficacy of lignocaine local anesthesia in dentistry: A systematic review and meta-analysis of randomized, controlled trials.

Author(s): Sivaramakrishnan, Gowri; Sridharan, Kannan
Source: Journal of investigative and clinical dentistry; Sep 2017
Publication Type(s): Journal Article Review

Abstract: Alternatives to adrenaline with lignocaine local anesthesia, such as clonidine, have been trialed in various randomized, controlled trials. Therefore, the aim of the present systematic review was to compile the available evidence on using clonidine with lignocaine for dental anesthesia. [ABSTRACT EDITED]

Videolaryngoscopy vs. direct laryngoscopy use by experienced anaesthetists in patients with known difficult airways: a systematic review and meta-analysis.

Author(s): Pieters, B M A; Maas, E H A; Knape, J T A; van Zundert, A A J
Source: Anaesthesia; Sep 2017
Publication Type(s): Journal Article Review

Abstract: Experienced anaesthetists can be confronted with difficult or failed tracheal intubations. We performed a systematic review and meta-analysis to ascertain if the literature indicated if
videolaryngoscopy conferred an advantage when used by experienced anaesthetists managing patients with a known difficult airway. [ABSTRACT EDITED]

Comparison of General and Local Anesthesia for Deep Brain Stimulator Insertion: A Systematic Review.

Author(s): Sheshadri, Veena; Rowland, Nathan C; Mehta, Jigesh; Englesakis, Marina; Manninen, Pirjo;
Source: The Canadian journal of neurological sciences. Le journal canadien des sciences neurologiques; Sep 2017 ; p. 1-8
Publication Type(s): Journal Article
Available at The Canadian journal of neurological sciences. Le journal canadien des sciences neurologiques - from EBSCO (MEDLINE Complete)
Abstract: BACKGROUND Subthalamic nucleus deep brain stimulation (STN-DBS) has become a standard treatment for many patients with Parkinson’s disease (PD). The reported clinical outcome measures for procedures done under general anesthesia (GA) compared to traditional local anesthetic (LA) technique are quite heterogeneous and difficult to compare. The aim of this systematic review and metaanalysis was to determine whether the clinical outcome after STN-DBS insertion under GA is comparable to that under LA in patients with Parkinson’s disease. [ABSTRACT EDITED]

Effects of pregabalin on postoperative pain after hysterectomy under spinal anesthesia with intrathecal morphine: a randomized controlled trial.

Author(s): Kiatchai, Taniga; Sanansilp, Vimolluck; Triyasunant, Namtip; Saengprateep, Sasithorn;
Source: Journal of anesthesia; Sep 2017
Publication Type(s): Journal Article
Abstract: PURPOSE To determine if preoperative pregabalin could decrease 24-h postoperative morphine consumption after spinal anesthesia with intrathecal morphine compared with placebo. [ABSTRACT EDITED]

Effect of a mother’s recorded voice on emergence from general anesthesia in pediatric patients: study protocol for a randomized controlled trial.

Author(s): Song, Seok Young; Kwak, Sang Gyu; Kim, Eugene
Source: Trials; Sep 2017; vol. 18 (no. 1); p. 430
Publication Type(s): Journal Article
Available at Trials - from EBSCO (MEDLINE Complete)
Abstract: BACKGROUND Emergence delirium is a behavioral disturbance after general anesthesia in children and may distress both the patients and the primary caregivers, such as parents and medical staff, looking after the patients. Various medical and emotional interventions have been investigated to reduce emergence delirium; however, none are completely effective. This trial intends to assess whether the mother’s recorded voice can reduce this adverse post-anesthesia event and facilitate arousal from general anesthesia. [ABSTRACT EDITED]

Effect of an Intravenous Dexamethasone Added to Caudal Local Anesthetics to Improve Postoperative Pain: A Systematic Review and Meta-Analysis With Trial Sequential Analysis.

Author(s): Kawakami, Hiromasa; Mihara, Takahiro; Nakamura, Nobuhito; Ka, Koui; Goto, Takahisa
Source: Anesthesia and analgesia; Sep 2017
Publication Type(s): Journal Article
Available at Anesthesia and analgesia - from Ovid (Journals @ Ovid)
Abstract: BACKGROUND Caudal anesthesia has been used for postoperative pain control in pediatric surgical patients, but the duration of the analgesic effect is occasionally unsatisfactory. Intravenous steroids have been shown to be effective for postsurgical pain management after certain surgeries. The aim of this meta-analysis with trial sequential analysis (TSA) was to evaluate the analgesic effect of steroids in patients administered with caudal anesthesia. [ABSTRACT EDITED]

Effect of anesthesia depth on postoperative clinical outcome in patients with supratentorial tumor (DEPTH): study protocol for a randomized controlled trial.

Author(s): Cui, Qianyu; Peng, Yuming; Liu, Xiaoyuan; Jia, Bo; Dong, Jia; Han, Ruquan
Source: BMJ open; Sep 2017; vol. 7 (no. 9); p. e016521
Publication Type(s): Journal Article
Available at BMJ open - from HighWire - Free Full Text
Abstract: INTRODUCTION Recent studies have shown that deep anaesthesia is associated with poor outcomes. However, no randomised controlled trials have been conducted to test the causality in patients undergoing brain tumour resection. [ABSTRACT EDITED]

Effects of epidural volume extension by saline injection on the efficacy and safety of intrathecal local anaesthetics: systematic review with meta-analysis, meta-regression and trial sequential analysis.

Author(s): Heesen, M; Weibel, S; Klimek, M; Rossaint, R; Arends, L R; Kranke, P
Source: Anaesthesia; Sep 2017
Publication Type(s): Journal Article Review
Abstract: Epidural volume extension, a modification of combined spinal-epidural anaesthesia, involves the epidural injection of saline in order to increase the spread of drugs given intrathecally. Results from individual studies have so far been contradictory and we aimed to gather the available evidence for this technique. We performed a systematic literature search for randomised, controlled trials comparing epidural volume extension after spinal injection with a control group without epidural injection in patients undergoing surgery. [ABSTRACT EDITED]

General Anesthesia versus Local Anesthesia in StereotaXY (GALAXY) for Parkinson's disease: study protocol for a randomized controlled trial.

Author(s): Holewijn, R A; Verbaan, D; de Bie, R M A; Schuurman, P R
Source: Trials; Sep 2017; vol. 18 (no. 1); p. 417
Publication Type(s): Journal Article
Available at Trials - from BioMed Central
Abstract: BACKGROUND The aim of the study is to investigate if deep brain stimulation (DBS) in the subthalamic nucleus (STN) for Parkinson's disease (PD) under general anesthesia further improves outcome by lessening postoperative cognitive, mood, and behavioral adverse effects; shorten surgical time and hospital admittance; and produce comparable symptomatic and functional improvement to surgery under local anesthesia. [ABSTRACT EDITED]

Lessons learned on recruitment and retention in hard-to-reach families in a phase III randomised controlled trial of preparatory information for children undergoing general anaesthesia.

Author(s): Huntington, C; Newton, J Timothy; Donaldson, N; Liossi, C; Reynolds, P A; Alharatani, R; Hosey, M T
Source: BMC oral health; Sep 2017; vol. 17 (no. 1); p. 122
Publication Type(s): Journal Article
Available at BMC oral health - from BioMed Central
Abstract: BACKGROUND Recruitment and retention are documented as two of the most difficult elements of conducting clinical trials. These issues are even more challenging in paediatric trials, particularly when the families being recruited and retained are deemed 'hard to reach'.

Xenon as an adjuvant to sevoflurane anesthesia in children younger than 4 years of age, undergoing interventional or diagnostic cardiac catheterization: A randomized controlled clinical trial.

Author(s): Devroe, Sarah; Meeusen, Roselien; Gewillig, Marc; Cools, Bjorn; Poesen, Koen; Sanders, Robert;

Source: Paediatric anaesthesia; Sep 2017

Publication Type(s): Journal Article

Abstract: BACKGROUND Xenon has repeatedly been demonstrated to have only minimal hemodynamic side effects when compared to other anesthetics. Moreover, in experimental models, xenon was found to be neuroprotective and devoid of developmental neurotoxicity. These properties could render xenon attractive for the anesthesia in neonates and infants with congenital heart disease. However, experience with xenon anesthesia in children is scarce. AIMS We hypothesized that in children undergoing cardiac catheterization, general anesthesia with a combination of sevoflurane with xenon results in superior hemodynamic stability, compared to sevoflurane alone.

Tracheal extubation with suction vs. positive pressure during emergence from general anaesthesia in adults: a randomised controlled trial.

Author(s): L'Hermite, Joël; Wira, Olivier; Castelli, Chritel; Coussaye, Jean-Emmanuel de La; Ripart, Jacques;

Source: Anaesthesia, critical care & pain medicine; Sep 2017

Publication Type(s): Journal Article

Abstract: BACKGROUND After general anaesthesia (GA) in adults, the optimal tracheal extubation technique (positive pressure or suctioning) remains debated. The primary endpoint of this study was to assess the effects of these techniques on onset time of desaturation (SpO2 < 92%).

The use of ketamine in ECT anaesthesia: A systematic review and critical commentary on efficacy, cognitive, safety and seizure outcomes.

Author(s): Gálvez, Verònica; McGuirk, Lucy; Loo, Colleen K

Source: The world journal of biological psychiatry : the official journal of the World Federation of Societies of Biological Psychiatry; Sep 2017; vol. 18 (no. 6); p. 424-444

Publication Type(s): Journal Article

Abstract: OBJECTIVES This review will discuss ECT efficacy and cognitive outcomes when using ketamine as an ECT anaesthetic compared to other anaesthetics, taking into account important moderator variables that have often not been considered to date. It will also include information on safety and other ECT outcomes (seizure threshold and quality).

Dexmedetomidine Combined With Intravenous Anesthetics in Electroconvulsive Therapy: A Meta-analysis and Systematic Review.

Author(s): Li, Xiang; Tan, Fang; Cheng, Nan; Guo, Na; Zhong, Zhi-Yong; Hei, Zi-Qing; Zhu, Qian-Qian; Zhou, Shao-Li
**Source:** The journal of ECT; Sep 2017; vol. 33 (no. 3); p. 152-159

**Publication Type(s):** Journal Article

**Abstract:**

OBJECTIVE

The aim of this study was to investigate how the combined use of dexmedetomidine with intravenous anesthetics influences seizure duration and circulatory dynamics in electroconvulsive therapy (ECT). [ABSTRACT EDITED]

Desflurane versus sevoflurane in pediatric anesthesia with a laryngeal mask airway: A randomized controlled trial.

**Author(s):** Kim, Eun-Hee; Song, In-Kyung; Lee, Ji-Hyun; Kim, Hee-Soo; Kim, Hyun-Chang; Yoon, Soo-Hyuk;

**Source:** Medicine; Sep 2017; vol. 96 (no. 35); p. e7977

**Publication Type(s):** Randomized Controlled Trial Journal Article

Available at Medicine - from Europe PubMed Central - Open Access

**Abstract:**

BACKGROUND

Desflurane with a laryngeal mask airway may have advantages during ambulatory anesthesia. However, desflurane-induced airway irritability makes the use of desflurane challenging, especially in children. This study compared desflurane with sevoflurane maintenance anesthesia in terms of respiratory events and the emergence characteristics in children with a laryngeal mask airway. [ABSTRACT EDITED]

Preliminary investigation of preoperative pregabalin and total intravenous anesthesia doses: a randomized controlled trial.

**Author(s):** Chavush, Mine Altındağ; Yağar, Seyhan; Ertürk, Ayşim; Özgök, Ayşegül

**Source:** Journal of clinical anesthesia; Sep 2017; vol. 41; p. 137-140

**Publication Type(s):** Journal Article

**Abstract:**

STUDY OBJECTIVE

To determine the efficacy of 2 different doses (150-300mg) of preoperative pregabalin on propofol and remifentanil doses for total intravenous anesthesia in laparoscopic cholecystectomy. [ABSTRACT EDITED]

Laparoscopic cholecystectomy under neuraxial anesthesia compared with general anesthesia: Systematic review and meta-analyses.

**Author(s):** Longo, Marcelo A; Cavalheiro, Bárbara T; de Oliveira Filho, Getúlio R

**Source:** Journal of clinical anesthesia; Sep 2017; vol. 41; p. 48-54

**Publication Type(s):** Journal Article Review

**Abstract:**

BACKGROUND

Pneumoperitoneum during laparoscopic cholecystectomy (LC) can cause hypercapnia, hypoxemia, hemodynamic changes and shoulder pain. General anesthesia (GA) enables the control of intraoperative pain and ventilation. The need for GA has been questioned by studies suggesting that neuraxial anesthesia (NA) is adequate for LC. STUDY OBJECTIVE

To quantify the prevalence of intraoperative pain and to verify whether evidence on the maintenance of ventilation, circulation and surgical anesthesia during NA compared with GA is consistent. [ABSTRACT EDITED]

Comparison of LMA Supreme™ with i-gel™ and LMA ProSeal™ in children for airway management during general anaesthesia: A meta-analysis of randomized controlled trials.

**Author(s):** Bhattacharjee, Sulagna; Som, Anirban; Maitra, Souvik

**Source:** Journal of clinical anesthesia; Sep 2017; vol. 41; p. 5-10

**Publication Type(s):** Journal Article
**Abstract:** STUDY OBJECTIVE: A few randomized trials have compared LMA Supreme™ with LMA ProSeal™ and i-gel™ in children but their conclusions varied widely. This systematic review and meta analysis has compared the former device with the latter two devices. [ABSTRACT EDITED]

**Central regional anaesthesia in patients with aortic stenosis - a systematic review.**
**Author(s):** Johansson, Sofia; Lind, Morten Nikolaj
**Source:** Danish medical journal; Sep 2017; vol. 64 (no. 9)

**Abstract:** INTRODUCTION: Aortic stenosis is a valvular lesion that poses several haemodynamic challenges for the anaesthesiologist. The use of central regional anaesthesia is traditionally regarded as contraindicated in patients with severe aortic stenosis due to its sympatholytic effect, potentially causing loss of vascular tone and ultimately diminished cardiac output. The aim of this paper was to review current literature to find evidence for or against the use of neuroaxial blockade in patients with aortic stenosis. [ABSTRACT EDITED]

**Comparison Between the Cobra Perilaryngeal Airway and Laryngeal Mask Airways Under General Anesthesia: A Systematic Review and Meta-analysis.**
**Author(s):** Xu, Rui; Zhu, Yun; Fan, Qing; Shen, Xia; Li, Wen Xian
**Source:** Anesthesia and analgesia; Sep 2017; vol. 125 (no. 3); p. 958-966

**Abstract:** The complication rate and efficacy of the Cobra Perilaryngeal Airway (CobraPLA) and laryngeal mask airways (LMAs®) have been evaluated in the published literature, but the conclusions have been inconsistent. The aim of this systematic review and meta-analysis was thus to assess the performance of the CobraPLA and LMAs under general anesthesia. [ABSTRACT EDITED]

**Anesthetic and Obstetric Management of Syringomyelia During Labor and Delivery: A Case Series and Systematic Review.**
**Author(s):** Garvey, Gráinne Patricia; Wasade, Vibhangini S; Murphy, Kellie E; Balki, Mrinalini
**Source:** Anesthesia and analgesia; Sep 2017; vol. 125 (no. 3); p. 913-924

**Abstract:** BACKGROUND: Syringomyelia is a rare, slowly progressive neurological condition characterized by the presence of a syrinx within the spinal cord. Consensus regarding the safest mode of delivery and anesthetic management in patients with syringomyelia remains controversial and presents management dilemmas. This study reviews the cases of syringomyelia at our institution and provides a systematic review of the literature to guide decisions regarding labor and delivery management. [ABSTRACT EDITED]

**Perioperative Amino Acid Infusion for Preventing Hypothermia and Improving Clinical Outcomes During Surgery Under General Anesthesia: A Systematic Review and Meta-analysis.**
**Author(s):** Aoki, Yoshitaka; Aoshima, Yukie; Atsumi, Kazuyuki; Kaminaka, Ryo; Nakau, Rintaro; Yanagida, Kyoko; Kora, Makiko; Fujii, Shunsuke; Yokoyama, Junichiro
**Source:** Anesthesia and analgesia; Sep 2017; vol. 125 (no. 3); p. 793-802

**Publication Type(s):** Meta-analysis Journal Article Review
Available at Anesthesia and analgesia - from Ovid (Journals @ Ovid)
Abstract: Amino acid (AA) infusion is sometimes selected to avoid hypothermia during general anesthesia. However, the widespread clinical use of AA infusion therapy has not been established. This study aimed to clarify the evidence that AA infusion can increase patient body temperature and improve clinical outcomes using the Grading of Recommendations Assessment, Development, and Evaluation system. [ABSTRACT EDITED]

Low Back Pain in Pregnancy: Investigations, Management, and Role of Neuraxial Analgesia and Anaesthesia: A Systematic Review
Author(s): Sehmbi H.; D’Souza R.; Bhatia A.
Source: Gynecologic and Obstetric Investigation; Sep 2017; vol. 82 (no. 5); p. 417-436
Publication Type(s): Review
Abstract: Background: Low back pain (LBP) is commonly experienced during pregnancy and is often poorly managed. There is much ambiguity in diagnostic work-up, appropriate management and decision-making regarding the use of neuraxial analgesia and anaesthesia during labour and delivery in these patients. This systematic review summarises the evidence regarding investigations, management strategies and considerations around performing neuraxial blocks for pregnant women with LBP. [ABSTRACT EDITED]

The effects of general anaesthesia and surgery on oxygen consumption (VO2): A systematic literature review and meta-analysis
Author(s): Jakobsson J.; Vadman S.; Kalman S.; Bartha E.
Source: Acta Anaesthesiologica Scandinavica; Sep 2017; vol. 61 (no. 8); p. 1009-1010
Publication Type(s): Conference Abstract
Abstract: Background: The aim of intraoperative goaldirected haemodynamic therapy is to increase the intraoperative oxygen delivery (DO2). However, according to earlier research, anaesthesia reduces the oxygen consumption (VO2). Aim: To perform a systematic literature review and meta-analysis on the influences of general anesthesia, surgery and recovery on VO2. [ABSTRACT EDITED]
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