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Dexmedetomidine and Remifentanil is used as total intravenous Anesthetic agents in providing general anesthesia for a 3 month old infant for a Posterior Sagittal Anorectoplasty (PSARP)

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Concern has been raised on the potential deleterious neurocognitive effects of general anesthesia during infancy and early life. Although there are no definitive data to prove this effect, the neonatal and infancy period has been suggested to be the most vulnerable period, and some studies observed an association between exposure to general anesthesia as an infant, and later neurobehavioral problems in childhood. The potential neurocognitive effects of various general anesthetic agents have been demonstrated in laboratory animals and suggested from retrospective clinical trials. The anesthetic agents identified as possible neurotoxins include either γ-amino-butyric-acid (GABA) agonists including the volatile anesthetic agents, benzodiazepines, barbiturates or N-methyl-D-aspartate (NMDA) antagonists such as ketamine. Although regional anesthesia is an acceptable alternative, many surgical procedures may not be amenable to regional anesthesia. Dexmedetomidine and remifentanil on the other hand, seem to be spared of such controversy, however limited data are available regarding their combined use during surgery in infants and Anesthesia. We herein present a case of a 3 month 3 week old infant who presented for examination under anesthesia of bilateral ears as well as Posterior Sagittal Anorectoplasty for anorectal malformation, for which general anesthesia was provided by using a combination of remifentanil and dexmedetomidine.

Biography

Ayesha Ali work as a consultant paediatric Anesthesia and paediatric pain management in KKH, which is theonly paediatric hospital in Singapore. The hospital has all the sub-specialty in paediatric surgery and do about 600+ theatre cases per year in all the sub-specialty excluding cardiac surgery and manage over 700+ cases for paediatric pain management per year. The specialties in general surgery include thoracic, upper GI, lower GI, oncology and urology, orthopedic specialty including scoliosis surgery. ENT including airway surgery, plastic specialty including cleft surgery. There are regular endoscopy lists where I teach deep sedation with TCI intravenous agents, and sedation for procedural pain. She is also involved in cardiac catheter lists and paediatric radiology lists.

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