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Method of anesthesia for contour plasty of complicated fractures of the lower orbit wall

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Purpose: The goal is to optimize the anesthetic aid for bone-plastic operations in orbit with double access (transconjunctival or transorbital in combination with transnasal endoscopic access). The tasks are 1. To evaluate the efficacy of combined general anesthesia with sevoflurane, propofol with regional anesthesia, including: palatine access to the wing-palatal anesthesia (palatinal); infraorbital anesthesia; the van Lint block; application anesthesia; 2. To evaluate the safety this investigation.

Materials and Methods: The object of the study is children aged 4 to 17 years. Premedication is not performed. For all children in all groups, the induction of anesthesia is performed by inhaling sevoflurane through the facial mask with the preliminary filling of the respiratory circuit of the anesthesia apparatus with a gas-drug mixture with an anesthetic content of 7-8% by volume. Maintenance of anesthesia during spontaneous breathing through ETT is carried out as follows: inhalation of sevoflurane in an air-oxygen mixture with an O_2 content of 40% and an anesthetic concentration of 0.7-0.9 MAK and intravenous injection of propofol at a dose of 2 mg/kg immediately after induction; regional anesthesia: anterior-temporal blockade, Wang Lint block, infraorbital anesthesia and palatine anesthesia, application anesthesia.

Results and Conclusions:

- 1. Stability of hemodynamic parameters
- 2. Refusal of narcotic drugs
- 3. Absence of oculocardial and oculogastral reflexes
- 4. Early readaptation of patients
- 5. Reduction of postoperative fasting time
- 6. Comfortable work of surgeons

Keywords: Orbit, contour plastics, regional anesthesia, infraorbital anesthesia, palatal anesthesia.

Biography

Korobova Lyudmila Sergeevna is the doctor, anesthesiologist of the Department of Anesthesiology and Intensive Care; a doctor of the highest qualification category, an aspirant.

Notes:

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