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Thinking About Anesthesia

By Judith A. Greenfield, PhD, RN

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Today's surgical patients have much to be thankful for – not the least of which is that they have the option of surgery as a means of dealing with their condition. Very little surgery could be performed before the chance discovery, in the first half of the 1800s, that “ether” could numb people to pain. Conditions that can be cured by “simple” surgery today, were once death sentences. Appendicitis is a case in point. That changed with the first use of ether during surgery, in 1842, and continues to this day – with advances in the field of anesthesiology making the use of anesthesia safer, more effective, and more easily tolerated. (Many of us who have had surgery as little as 30 years ago well remember the unpleasant after-effects of anesthesia.)

Although anesthesia is a key and critical part of any surgery, we tend to take it for granted – giving it little thought. Like any aspect of medicine, however, there are often decisions to be made here. For instance, there are different forms of anesthesia, each with their own advantages and disadvantages. The three main forms are: local anesthesia (numbing the surgical site only), regional anesthesia (the surgical site *and* the area around it are numbed) and general anesthesia (where the patient is unconscious).

While there is not always a choice in the form to be used, understanding the process can help patients prepare for, and recover from, their surgery. Communication plays an important role here, as well. By speaking with the professionals who will deliver the anesthetic and monitor your condition during surgery – doctors (called anesthesiologists) or nurse anesthetists (nurses who are specially trained to deliver anesthesia) – you provide information that will enable them to make decisions that are better suited to you. For instance, the particular anesthetic drug and the dosage level to use.

For a variety of reasons, this may be especially important when it comes to the use of general anesthesia. For example, elderly patients face increased risks because of the effects of aging on their heart, kidneys, and other major systems. Talking with anesthetists beforehand, gives them important information – information they can use to minimize potential risks. Another potential problem with general anesthesia – anesthesia awareness – has been the subject of attention for the last few years. Anesthesia awareness is when patients awaken during the surgery. Fortunately, estimates are that it occurs less than one percent of the time – in .2 to .7 percent of surgeries where general anesthetics are used. Nevertheless, this is something to try to avoid, and communication may help.

The [American Association of Nurse Anesthetists](#) states there are three possible causes of anesthesia awareness: factors related to the monitoring equipment, the anesthetic, and

patient-related conditions, including age, obesity, substance abuse and so on. With respect to equipment, new monitors – such as the Bispectral Index, the Patient State Analyzer, and Narcotrend – have been developed. Early studies are showing these monitors to be more effective in indicating a patient’s return to consciousness than traditional EEG monitors. Research in this area is new enough, however, that the use of these monitors may not yet be widespread. As an active patient, you might want to ask the hospitals or anesthesiologists you are considering, if they are using these newer machines.

Because of the other possible causes, however, it is even more important for you to speak frankly with your anesthesiologists before the surgery. Such conversations routinely occur the night before the surgery or, in the case of ambulatory surgery, shortly before it takes place. If you feel the need to, however, you can speak with an anesthesiologist before that. In fact, doing so can help you understand what you must do to prepare for anesthesia. For instance, you can learn what herbal supplements should be discontinued because they can interact with general anesthesia and cause unwanted side effects.

Whether the conversation takes place sooner or later, however, it might help you to take the time, beforehand, to learn what you can. To find more information on the subject, visit the nurse anesthetists’ site (click on above link) and the [American Society of Anesthesiologists](#). Both sites provide information on their patient-education or public pages.□

Judith A. Greenfield is contributing editor of the *Healthcare Communication Review* and President of the Healthcare Communication Project, Inc.

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