Topical pharyngeal anesthesia for unsedated esophagogastroduodenoscopy procedure in sick patients

The aim of this study was to evaluate and compare the clinical efficacy of topical pharyngeal anesthesia for unsedated esophagogastroduodenoscopy (UEGD) procedure in sick (American Society of Anesthesiologists [ASA] physical status III-IV) and nonsick (ASA physical status I-II) patients in a teaching hospital in Thailand. We undertook a retrospective review of the anesthesia or sedation service records of adult patients who underwent UEGD procedures from October 2008 to September 2009. All patients were classified into two groups according to the ASA physical status. In group A, the patients had ASA physical status I-II, while in group B, the patients had ASA physical status III-IV. The primary outcome variable of the study was the successful completion of the procedure. The secondary outcome variables were anesthesia and procedure-related adverse events during and immediately after the procedure. After matching age, gender, weight, height and duration of procedure, there were 566 adult patients who underwent UEGD procedures by using topical pharyngeal anesthesia. Of these, 287 patients were in group A and 279 patients were in group B. There were no significant differences in age, gender, weight, height and duration of UEGD procedure between the two groups. All patients in both groups successfully completed the procedure except four patients in group A, and one patient in group B (P=0.188). Anesthesia and procedure-related adverse events in both groups were not significantly different. All adverse events were transient and mild degree with no adverse sequelae. Topical pharyngeal anesthesia for UEGD procedure in sick patients by trained anesthetic personnel with appropriate monitoring was safe and effective. The clinical efficacy of this technique in sick patients was not different or worse than in nonsick patients. Serious adverse events were rare in our population.

References

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Keywords

Topical; Pharyngeal anesthesia; Esophagogastroduodenoscopy; Unsedated; Sick; Efficacy; Safety

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