REFERENCES


(Accepted for publication September 11, 1986.)

In reply.—We appreciate very much the comments offered by Dr. Robinson and Dr. Albin. Their welcome discussion of both precordial Doppler monitoring and appropriately positioned multi-orificed central venous catheters in the management of parturients undergoing cesarean section with regional anesthesia significantly broadens the scope and intent of our original article.

Anesthesiology 66:94, 1987

DIRK YOUNKER, M.D.
VICTOR RODRIGUEZ, M.D.
JAMES KAVANAUGH, M.D.
Department of Anesthesiology
Baylor College of Medicine
One Baylor Plaza
Houston, Texas 77030
(Accepted for publication September 11, 1986.)

Safety of Continuous Epidural Infusions

To the Editor:—We read with interest the case report by Lin et al.1 regarding neurologic sequelae after accidental injection of toxic substances into the epidural space. We recognized the potential for this disaster prior to our initiating continuous epidural opiate infusions, and have taken steps to minimize the potential for such an occurrence.

We agree with the authors’ recommendations for decreasing such accidents, and offer further suggestions:

1. We use a special solution administration set (#2C1503 Travenol Laboratories Inc., Deerfield, Illinois) which has no injection ports and makes a Leur lock connection with the epidural catheter. In addition, we securely tape this connection.

2. All patients treated with epidural morphine postoperatively are sent to one of two hospital wards where the nursing staff is familiar with epidural opiate analgesia and the equipment involved.

3. Any manipulations of the tubing or catheter are performed by a member of our department.

GLEN A. FROMME, M.D.
Assistant Professor of Anesthesiology
SCOTT R. ATCHISON, M.D.
Instructor in Anesthesiology
Department of Anesthesiology
Mayo Medical School
Rochester, Minnesota 55905

REFERENCE


(Accepted for publication September 13, 1986.)

Safe, Continuous Epidural Infusions

To the Editor:—Drs. Lin, Becker, and Shapiro1 present a timely report on neurologic changes following accidental drug injection through continuous epidural catheters. One way that accidental injection of a continuous epidural catheter can be prevented is by the use of rigid tubing without any ports designed for continuous pressure