

- A-43 Room 224-226, 10/17/2000 10:30 AM - 12:00 PM (PD)**
Femoral Nerve Block Improves Analgesia after Outpatient Anterior Cruciate Ligament Repair *Katbleen L. Larkin, MD; Michael F. Mulroy, MD, Anesthesiology, Virginia Mason Medical Center, Seattle, WA, United States.* Femoral nerve block with bupivacaine is superior to oral analgesics alone for pain relief in the first 24 hrs following outpatient ACL repair.
- A-44 Room 224-226, 10/17/2000 10:30 AM - 12:00 PM (PD)**
Assessment of Balance Function Using Computerized Force Platform Following Ambulatory Anesthesia *Dajun Song, MD; Fang Xu, MD; Frances Chung, FRCPC; Jean Wong, FRCPC; Kathryn Jenkins, FRCGA, Anestheisa, Toronto Western Hospital, Toronto, ON, Canada.* Compared to propofol, desflurane was associated with less balance disturbance during patient early recovery (measured using Balance Master®).
- A-45 Room 224-226, 10/17/2000 10:30 AM - 12:00 PM (PD)**
Influence of the Type of Anesthesia on the Patient's Length of Stay in the PACU of an Ambulatory Surgery Center *Nitin Shab, M.D.; Sara L. Clack, R.A.; Terry Trautloff, R.N.; Eliza-Jasmine Tran, B.A.; Cymbria T. Anderson, M.D., Anesthisology, University of California, Irvine, CA, United States.* Patients having MAC had a significantly shorter stay in the PACU in comparison to other types of anesthesia.
- A-46 Room 224-226, 10/17/2000 10:30 AM - 12:00 PM (PD)**
Improved Utilization of Perioperative Services Following Separation of Out- and Inpatient Units *Peter Mollenbott, MD; Brenda Gaebel, RHIT, Anesthisology, OHSU, Portland, OR.* Separation of out- and inpatient surgery units results in increased efficiency for the Perioperative Services with significantly shorter anesthesia ready and recovery length of stay times.
- Geriatric Anesthesia:**
- A-47 Room 224-226, 10/17/2000 3:30 PM - 5:00 PM (PD)**
Spatial Memory in Young Adult and Aged Rats 1 and 3 Weeks after Anesthesia *D.J. Culley, MD; R.Y. Yukhananov, MD, Ph.D.; M.G. Baxter, Ph.D.; G. Crosby, MD, Anesthisology, Harvard Medical School/BWH, Boston, MA, United States.* Using a spatial memory test, we demonstrate that prior general anesthesia attenuates the performance improvement normally associated with repeated testing in aged rats.
- A-48 Room 224-226, 10/17/2000 3:30 PM - 5:00 PM (PD)**
Postoperative Cognitive Dysfunction Is More Common in the Elderly Following Major Surgery *Terri G. Monk, MD; Cyndi W. Garvan, PhD; Duane E. Dede, PhD; Maria T. van der Aa, BS; Joachim S. Gravenstein, MD, Dept of Anesthisology, University of Florida, Gainesville, FL, United States.* POCD is more common in elderly (>60 yrs) than younger patients at 1 week and 3 months after major surgery.
- A-49 Room 224-226, 10/17/2000 3:30 PM - 5:00 PM (PD)**
The Relationship between Age and Postoperative Delirium in Patients with Normal Cognitive Function *B.C. Weldon, MD; C.W. Garvan, PhD; D.C. Olsen, BS; M.T. van der Aa, BS; T.G. Monk, MD, Dept of Anesthisology, Univ of Fla, Gainesville, FL, United States.* Postoperative delirium is uncommon in young adults with normal preoperative cognitive function, however the incidence increases with age.
- A-50 Room 224-226, 10/17/2000 3:30 PM - 5:00 PM (PD)**
The Incidence of Deep Vein Thrombosis in Patients with the Neck Fracture of the Femur *Chiyoko Nagata, MD; Fumiharu Yanagi, MD, PhD; Seiji Kozuma, MD; Sinnichi Goto, MD; Hidenori Terasaki, MD, PhD, Anesthisia, Kumamoto Rosai Hospital, Yatsushiro, Japan.* DVT were detected with high frequency of 59% in the patients with fractures of the femoral neck. Duration of bed rest was the only predictor of DVT.
- A-51 Room 224-226, 10/17/2000 3:30 PM - 5:00 PM (PD)**
Power Spectrum of Heart Rate Variability in the Geriatric Patients Undergoing Spinal Anesthesia *Jongin Han, MD; Chihyo Kim, MD; Guiyong Lee, MD; Choonbee Lee, MD, Anesthisology, Ewha Woman's University Hospital, Seoul, Korea.* The sympathetic-parasympathetic balance decreased for a long time after spinal anesthesia in geriatric patients with spectral analysis of HRV.
- A-52 Room 224-226, 10/17/2000 3:30 PM - 5:00 PM (PD)**
Cardiac Surgery in the Elderly *Frederique Ryckwaert, MD; Paul Andre Chaptal, MD; Pascal Colson, MD, Service d'Anesthisie-Reanimation "B" CHU, Montpellier, France.* Mortality after cardiac surgery is increased in patients older than 75 years due to a greater mortality rate in case of complications.
- A-53 Room 224-226, 10/17/2000 3:30 PM - 5:00 PM (PD)**
Health-Related Quality of Life (HRQL) and Life Satisfaction (LS) after Cardiac Surgery and Postoperative ICU - Treatment: Effect of Age *Christian Stoll, MD; Markus Richter, MS; Georg Nollert, MD; Gustav Schelling, MD, Anaesthisology, Ludwig Maximilians-University, Munich, Germany.* Patients >70 ys had a comparable gain in HRQL and LS after cardiac surgery at a similar total cost of care.
- A-54 Room 224-226, 10/17/2000 3:30 PM - 5:00 PM (PD)**
Anesthesiologists Are Not Discontinuing the New MAO Inhibitor Selegiline Preoperatively *J.F. Foss, MD; S. Daves, MD; M. O'Connor, MD, Anesthisia & Critical Care, The University of Chicago, Chicago, IL, United States.* Selegiline, a MAO-B inhibitor which may have opioid interactions, would be conservatively managed by discontinuation preoperatively.