ASA ABSTRACTS

Clinical Circulation: Pharmacology / Physiology

A-147 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Propanolol Kinetics in Patients Submitted to Cardiac Surgery with Cardiopulmonary Bypass Jose Otavio C. Auler Jr., MD, PhD; Maria Jose C. Carmona, MD; Valeria A. Pereira, Pharm; Silvia R.C.J. Santos, Pharm, Anesthesia Dept., Instituto do Coracao, Sao Paulo, Sao Paulo, Brazil. Propanolol plasma levels and pharmacokinetics (PK) may be altered by cardiopulmonary bypass (CPB).

A-148 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Inter- and Intraindividual Variability of Cardiac Output in Surgical Patients Frederik Boer, MD PhD; Jette A. Kuipers, MD PhD; Sesma M. Arboos, MD PhD; Anton G.L. Bunn, PhD; James G. Bozil, MD, PhD. Anesthesiology, Leiden University Medical Center, Leiden, Netherlands. A predictive model of cardiac output based on demographic parameters of surgical patients explained 44% of the variability of the measured cardiac output.

A-149 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Does the Administration of Thoracic Epidural Lidocaine Affect Oxygenation during Anesthesia for One-Lung Ventilation (OLV) in Patients Undergoing Thoracic Surgery? J.H. Campos, MD; T.J. Brennan, MD; C.F. Massa, MD; K.H. Kornstine, MD. Anesthesia, University of Iowa Hospitals & Clinics, Iowa City, IA, United States. Epidural lidocaine can be used during anesthesia and OLV without impairing oxygenation.

A-150 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Recovery of Thalamic and Cortical Evoked Potentials after Hypothermic Circulatory Arrest with Retrograde Cerebral Perfusion Albert T. Cheung, MD; Stuart J. Weiss, MD; PhD; Glen Kent, BS; Joseph E. Baravarian, MD; Mark M. Stecker, MD, PhD, Anesthesiology, Univ of Penn, Philadelphia, PA, United States. The delay in recovery of cortical SEP after DHCA was reduced by RCP, but still proportional to the duration of DHCA.

A-151 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Perfluorocarbon Emulsions Increases the Blood Solubility of Volatile Anesthetics In Vitro Olivier Y. Caignet, MD; Luc J. Vanobbergh, MD, PhD; Philippe J. Baele, MD. Centre de Medicin Clinique, Hopital Militaire, Brussels, Belgium. Clinical doses of Perfluorocarbons in blood increase the solubility of modern volatile anesthetics, which may influence the level of anesthesia.

A-152 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
The Effects of Halothane, Sevoflurane, and Propofol on Left Ventricular Diastolic Function in Healthy Subjects Miodrag Filipovic, MD; Manfred D. Seeberger, MD; Patrick Hunziker, MD; Karl Skarvan, MD, Dept. of Anesthesia and Division of Cardiology, University of Basel/Kantonsspital, Basel, Switzerland. Propofol, halothane, and sevoflurane have differential effects on LV diastolic function.

A-153 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Fenoldopam Preserves Renal Function after Aortic Cross-Clamping Timothy B. Gilber, MD; Jawad U. Husain, MD; William R. Flink, MD, Anesthesiology, University of Maryland, Baltimore, MD, United States. 22 patients for major vascular repairs received fenoldopam as a renal protectant. Shown by serial creatinine clearances, fenoldopam preserved renal function with return of baseline values within 24 hours.

A-154 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Effect of Olprinone and Milrinone on Cerebral Blood Flow in Patients Following Cardiac Surgery Koji Goto, MD; Shigemori Yoshitake, MD; Koji Ito, MD, Akio Mizutani, MD; Takayuki Nagoe, MD, Anesthesiology, Oita Medical University, Oita, Oita, Japan. PDE III inhibitor led to increase in cerebral blood flow. Olprinone demonstrated more remarkable cerebral vasodilatory action than milrinone.

A-155 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Baroreflex Sensitivity and Autonomic Activity in Perioperative Period: Effect of Age P. Gratadour, MD, V. Meyriaz-Peyrus, MD; A. Cevadjan, MSc; G. Viale, MD,PhD; L. Quintin, MD,PhD, Anesthesiology, Hop. E. Herriot, Lyon, France. Upon the first 24 h after anesthesia, young patients experienced increase in vagal tone with a decrease in low frequency components of heart variability in contrast of the elderly.

A-156 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Intracavitary Contrast Intensity Following Transpulmonary Transmission of a Second-Generation Agent at Normal and Reduced Contractility C.A. Greten, MD; J.A. Brosseit, M.D; K.W. Lorenz, M.D.; H. Theil, M.D.; R. Roeser, M.D., Anesthesiology, University Hospital, Wuerzburg, Germany. Cyclic changes in intracavitary echodensity of a contrast agent reflected changes in LV isovolumetric contraction.

A-157 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Effects of Fenoldopam on Renal Function Following Cardiac Surgery Michele Halpenney, FFARCSI; Stinarusan Lakshmi, FFARCSI; Aonghus O’Donnell, FFARCSI; Sheila O’Callaghan-Enright, FFARCSI; George D. Shorten, MD, Anesthesia, Cork University Hospital, Cork, Ireland

A-158 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Autonomic Responses to Thermal Stresses during Dexmedetomidine Versus Placebo Infusions in Volunteers Charles W. Hogge, MD; Pekka Talke, M.D.; Daniel J. Sessler, M.D.; Charles A. Richardson, Ph.D., Anesthesiology, Washington University School of Medicine, St Louis, MO, United States. These data suggest that dexmedetomidine differentially affects cardiac and systemic sympathetic responses to shivering.

A-159 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)

A-160 Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
(S+)-Ketamine Increases Muscle Sympathetic Activity and Maintains the Sympathetic Response to Hypotensive Challenges P. Kienbaum, MD; Th. Heuter; G. Patlabovic, MD, PhD; M.C. Michel, J. Peters, MD, Abt. f. Anaesthesiologie & Intensivmedizin, Universitaetsklinikum, Essen, Germany. (S+)-ketamine increases muscle sympathetic activity and maintains its response to hypotensive challenges.