ASA ABSTRACTS

A-203 Room B, 10/17/2000 2:00 PM - 4:00 PM (PS)
Tissue Oxygenation during Acute Normovolemic Hemodilution with a Newly Designed Hydroxycryl Starch Solution in Volunteers
Frank Schroeder, MD; Thomas G. Standl, MD; Axel Nierhaus, MD; Marc A. Burmeister, MD; Joachim Schlote am Esch, MD, Dept. of Anesthesiology, University Hospital Eppendorf, Hamburg, Germany. HES 150,000 provides continuously increased tissue oxygen tensions after hemodilution.

A-204 Room B, 10/17/2000 2:00 PM - 4:00 PM (PS)
Synthetic Hemoglobin Reduces Perioperative Blood Transfusions in Vascular, Orthopedic and Abdominal Surgery
Armin Schubert, MD, MB; Eduard Mascha, MS; Jerome F. O’Hara, Jr, MD; Andrew Novick, MD; Kenneth Marks, MD, Anesthesiology, Cleveland Clinic Foundation, Cleveland, OH, United States. Synthetic hemoglobin results in sparing of PRBC transfusion in 24% of patients undergoing major non-cardiac surgery.

A-205 Room B, 10/17/2000 2:00 PM - 4:00 PM (PS)
Evaluation of the Anticoagulation Effect of Heparin Distal to Aortic Occlusion in Vascular Reconstrictive Surgery
Jaydeep S. Shah, MD; Robert Mueller, MD; Mark Farber, MD; Joseph J. Napolitano, MD; James E. Szalados, MD, Department of Anesthesiology, University of Texas Health Science Center, San Antonio, TX, United States. Heparinization during aortic reconstruction is maintained distal to the aortic clamp.

A-206 Room B, 10/17/2000 2:00 PM - 4:00 PM (PS)
Reducing the Incidence of Heparin Resistance: An Evidence-Based Guideline for Heparin Dosing for Cardiopulmonary Bypass
Thomas G. Standl, MD; Yu Chiao Chang, PhD; Sandrã de Bronkart, BSN; Derrick B. Wilsey, M.D.; Michael N. D’Ambra, M.D., Dept. of Anes. and Critical Care, Mass. Gen. Hospital, Boston, MA, United States. A practice guideline for heparin in 1310 CPB pts. sig. reduced heparin resistance.

Clinical Circulation: Pharmacology / Physiology

A-207 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
The Effect of Supplemental Fluid Administration on Tissue Perfusion and Tissue Oxygen Pressure
Cem F. Akritlic, MD; Akiko Taguchi, MD; Arrindabati Abduwalla, MDA; Daniel I. Sessler, M.D.; Andrea Kurz, M.D., Anesthesiology, Washington University, St. Louis, MO, United States. Perioperative additional fluid administration significantly increases tissue perfusion and oxygen pressure.

A-208 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Comparison of Perioperative Tissue Perfusion in In-patient Vs. Same Day Admitted Patients
Cem F. Akritlic, MD; Akiko Taguchi, MD; Arrindabati Abduwalla, MDA; Neera Sharnia, MA; Andrea Kurz, M.D., Anesthesiology, Washington University, St. Louis, MO, United States. Patients admitted to hospital on the same day of surgery are hypovolemic and can not restore normal peripheral perfusion intraoperatively.

A-209 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Circulatory Effects of IV Bolus Fenoldopam
John L. Allee, M.D.; M. Sweed Dibamee, M.D., Anesthesiology, Medical College of Wisconsin, Milwaukee, WI, United States. Compared to a saline control, IV bolus fenoldopam (0.4, 0.8, 1.2 mcg/kg) decreased blood pressure by 4 - 8% before anesthesia induction. No dose effectively blunted increased blood pressure after tracheal intubation.

A-210 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Exhaled Nitric Oxide during Liver Transplantation
Robert E. Black, BS; Michael A.E. Ramsay, MD; Mario T. Cancemi, BS; Tillmann Hein, MD; Kenneth T. Hicks, CBET, Anesthesiology, Baylor University Medical Center, Dallas, TX, United States. Exhaled nitric oxide levels remain elevated during liver transplantation until reperfusion of the healthy liver.

A-211 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
The Effect of Diprivan™ on Ischemia-Reperfusion Injury after Abdominal Aortic Aneurysm Surgery
Patrick J. Breen, FFARCSI; Neil J. McDonald, FFARCSI; Clive W. Mulholland, Ph.D., Department of Anesthesiology, St. Vincent’s Hospital, Dublin, Ireland. This pilot study shows that Diprivan™ fails to attenuate ischemia-reperfusion injury in marked contrast to thiopentone/sulfate.

A-212 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Attenuating the Hemodynamic Consequences of Tracheal Stimulation
E.G. Czeslick, M.D.; P.A. Klock, M.D.; J.M. Klafka, M.D.; J. Moss, MD; A. Grasso-Spianti, MD, Anesthesiost, Universitaet Halle, Halle, Germany. This study examined the effect of 2 doses of scvo and dex on attenuating the cough reflex and hemodynamic consequences of tracheal stimulation. At 1 MAC scvo better prevented HR increases and coughing.

A-213 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Endothelium-Dependent Thrombin-Induced Biphasic Regulations of Vascular Tone in Porcine Renal Artery
Dmitry N. Derkach, M.D.; Tetsuzo Nakayama, M.D.; Shousuke Takahashi, M.D., Ph.D., Department of Anesthesiology and Critical Care Medicine, Graduate School of Medical Sciences, Kyushu University, Fukuoka, Japan. Thrombin induce relaxation and contraction in porcine renal artery.

A-214 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Protecting the Heart with Ischemic Preconditioning and Enflurane Anesthesia during Off-Pump Coronary Surgery
Benjamin Drenger, M.D.; Yuval Maroz, M.D.; Dan Gilon, M.D.; Amir Elami, M.D.; Yaakov Gomol, M.D., Anesthesiology, Hadassah University Hospital, Jerusalem, Israel. Ischemic preconditioning and enflurane improved myocardial function and reduced free radical production in off-pump CABG.

A-215 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Matrix Metalloproteinase-9 during Cardiopulmonary Bypass
Helen F. Galley, PhD; Graeme D. Macaulay, BSc; Nigel R. Webster, MB, BPh D FRCA, Anesthesiology and Intensive Care, University of Aberdeen, United Kingdom. TNFα and MMP-9 are both increased during cardiopulmonary bypass. We conclude that iv heparin does not release MMP-9 and that the early rise in TNFα is not due to MMP-9.

A-216 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Heart Failure Does Not Alter Propofol Effects on Sarcolemmal Reticular Calcium Cycling
P.M. Heerdt, MD,PhD; A. The, BA; D.L. Lee, MD, Cornell Univ., New York, NY, United States. Propofol effects upon SR membranes isolated from failing human hearts with decreased expression of Ca2+ cycling genes was determined. The data show impaired SR function with CHF but no direct effects of propofol.