

- A-468** Room F, 10/17/2000 9:00 AM - 11:00 AM (PS)
Is Circulatory Phospholipase A₂ Removed by Large-Pore Continuous Hemodiafiltration in Septic Renal Failure? *Yoshiaki Terao, M.D.; Motobiro Sekino, M.D.; Sumitaka Haseba, M.D.; Masataka Saito, M.D.; Koji Sumikawa, M.D., Anesthesiology, Nagasaki University, Nagasaki, Japan.* Large-pore continuous hemodiafiltration is not an efficient therapy to remove circulatory phospholipase A₂.
- A-469** Room F, 10/17/2000 9:00 AM - 11:00 AM (PS)
Effects of Long Term Prone Positioning Versus Continuous Rotational Therapy on Lung Computed Tomographic Density in Patients with Adult Respiratory Distress Syndrome *Heinz D. Tschernich, MD; Thomas Weber, MD; Christian Sitzwohl, MD; Florian Grabenwoger, MD; Gunter Huemer, MD, Anesthesiology and General Intensive Care, University of Vienna, Vienna, Austria*
- A-470** Room F, 10/17/2000 9:00 AM - 11:00 AM (PS)
Attenuated Vascular Relaxation by Fenoldopam and Dopamine in Endotoxin Treated Rats *Michael H. Wall, M.D.; Pamela R. Roberts, M.D.; Miyuki Shouse, M.S.; Joseph R. Tobin, M.D.; Richard C. Prielipp, M.D., Anesth. Dept., Wake Forest Univ. Sch. of Med., Winston-Salem, NC, United States.* Only fenoldopam has a predictable pharmacodynamic profile in normal rings and rings from endotoxemic rats.
- A-471** Room F, 10/17/2000 9:00 AM - 11:00 AM (PS)
Hyperbaric Oxygen Reduces Tumor Necrosis Factor- α (TNF- α) Production and Lung Neutrophil Sequestration after Intestinal Ischemia Reperfusion *Zhong-Jin Yang, MD; Anthony Montante; Ziao-lan Ou; Enrico M. Camporesi, MD, Anesthesiology, SUNY Upstate Medical University, Syracuse, NY, United States*
- Critical Care & Trauma: Life Support, Trauma**
- A-472** Room F, 10/17/2000 2:00 PM - 4:00 PM (PS)
A Double-Blind, Randomized Comparison of IV Lorazepam Vs. Midazolam for Sedation of ICU Patients Via a Pharmacologic Model *Juliana Barr, MD; Katayoun Zomorodi, PhD; Edward Bertaccini, MD; Steven Shafer, MD; Eran Geller, MS, MD, Dept. of Anesthesia, Stanford University and VA Palo Alto Health Care System, Palo Alto, CA, United States.* The pharmacology of lorazepam vs. midazolam for ICU sedation.
- A-473** Room F, 10/17/2000 2:00 PM - 4:00 PM (PS)
Suspended Animation (SA) I: Hypothermic Aortic Flush during Prolonged Exsanguination Cardiac Arrest (ExCA) in Dogs *Wilhelm Bebringer, MD; Stephan Prueckner, MD; Ann Radovsky, MD; Samuel A. Tisherman, MD; Peter Safar, MD, SCRR, Univ. of Pittsburgh, Pittsburgh, PA, United States.* Cold aortic flush at begin of ExCA induces cerebral hypothermia rapidly and achieves normal outcome after up to 45 min no-flow.
- A-474** Room F, 10/17/2000 2:00 PM - 4:00 PM (PS)
Suspended Animation (SA) II: Pharmacologic Aortic Flush during Prolonged Exsanguination Cardiac Arrest (ExCA) in Dogs *Wilhelm Bebringer, MD; Kentner Rainer, MD; Ann Radovsky, PhD; Samuel A. Tisherman, MD; Peter Safar, MD, SCRR, Univ. of Pittsburgh, Pittsburgh, PA, United States.* In 20 min ExCA, drugs added to aortic arch flush do not enhance cerebral preservation by mild hypothermia, except for Tempol.
- A-475** Room F, 10/17/2000 2:00 PM - 4:00 PM (PS)
Tempol by Aortic Arch Flush (AAF) for Cerebral Preservation during 20 Min Exsanguination Cardiac Arrest (CA) in Dogs. Exploratory Experiments *Wilhelm Bebringer, MD; Xianren Wu, MD; Ann Radovsky, PhD; Samuel A. Tisherman, MD; Peter Safar, MD, SCRR, Univ. of Pittsburgh, Pittsburgh, PA, United States.* Tempol added to 24°C AAF improves outcome but does not avoid histologic damage to neurons.
- A-476** Room F, 10/17/2000 2:00 PM - 4:00 PM (PS)
Propofol Has a Less Severe Inhibitory Effect on Intestinal Peristaltic Reflex Than Midazolam *Wiebke Berg; Michael K. Herbert, MD; Maro Ritter; Peter Holzer, PhD; Norbert Roewer, MD, Dept. of Anesthesiology, University of Wuerzburg, Wuerzburg, Germany.* Propofol and midazolam inhibit intestinal motility in vitro, however, the inhibition due to propofol is less pronounced.
- A-477** Room F, 10/17/2000 2:00 PM - 4:00 PM (PS)
Percutaneous Tracheostomy - Ciaglia Blue Rhino Versus the Basic Ciaglia Technique of Percutaneous Dilatational Tracheostomy *C. Bybavn, MD; V. Lischke, MD, PhD; S. Halbig, MD; S. Mierdl, MD; K. Westphal, MD, PhD, Dept. of Anesthesiology, J.W. Goethe-University Hospital, Frankfurt, Germany.* 50 patients who underwent either Percutaneous Dilatational or Blue Rhino tracheostomy were studied.
- A-478** Room F, 10/17/2000 2:00 PM - 4:00 PM (PS)
Dilutional Acidosis-Water Dilutes the Strong Electrolytes and Causes a Dose Dependent Acidosis *Pema Dorje, MD; Stephen Bree, MD; Gaury Adbikary, MD; Satwant Samra, MD; Daniel Rana, MD, Anesthesiology, University of Michigan Health Systems, Ann Arbor, MI, United States*
- A-479** Room F, 10/17/2000 2:00 PM - 4:00 PM (PS)
Hemodynamic Effects of a Hemoglobin-Based Oxygen Carrier (Hemoglobin Glutamer-200[Bovine]) in Hypovolemic Dogs *Bernd Driessen, DVM, PhD; Jonathan S. Jabr, MD; Fedor Lurie, MD, PhD; Robert A. Gunther, PhD, Univ. of Pennsylvania.* In a dog hypovolemia model, clinically common criteria to guide resuscitation proved inadequate when Hemoglobin glutamer-200 (bovine) was administered.
- A-480** Room F, 10/17/2000 2:00 PM - 4:00 PM (PS)
Clinical Research in Emergency Patients — Experience with Delayed Consent at a Level 1 Trauma Center *Richard P. Dutton, MD; Colin F. Mackenzie, MD; Thomas M. Scalea, MD, Anesthesiology, University of Maryland, Baltimore, MD, United States.* Informed consent for research during emergencies can be obtained from trauma patients on a delayed basis. Acceptance of this approach is high.
- A-481** Room F, 10/17/2000 2:00 PM - 4:00 PM (PS)
Calculated Prehospital Ventilation in Trauma Patients by a Continuous Capnographic Monitoring *Matthias Helm, Dr.med.; Ralf Schuster, Dr.med.; Jens Hauke, Dr.med.; Lorenz Lampl, PD Dr.med., Dept. of Anaesthesiology and Intensive Care, Federal Armed Forces Medical Center Ulm, Ulm, Germany.* There is a significant increase in "normoventilation" by a etCO₂calculated and controlled ventilation in trauma victims.