

Local Anesthesia: Clinical & Basic Science

- A-813** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Effect of Lidocaine on DNA Synthesis in Human Lung Fibroblasts** Shamsuddin Akhtar, M.D.; Mabboub Egbali-Webb, Pharm D, Ph.D, Department of Anesthesiology, Yale University School of Medicine, New Haven, CT, United States
- A-814** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Single or Multiple Injections for Interscalene Brachial Plexus Anesthesia with 0.75% Ropivacaine?** Paolo Beccaria, MD; Andrea Casati, MD; Guido Fanelli, MD; Andrea Albertin, MD; Giorgio Torri, MD, Dept of Anesthesiology, IRCCS H San Raffaele, Milan, Italy. The multiple injection technique improves preparation time and quality of interscalene block with 0.75% ropivacaine.
- A-815** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Axillary Brachial Plexus Block and Nerve Injury: A Comparison of Blocks Conducted under Sedation Versus General Anesthesia** Bruce Ben-David, MD; Beno Rosenberg, MD; Shalom Stabl, MD, Department of Anesthesiology, Allegheny General Hospital, Pittsburgh, PA, United States. Axillary block under GA may have both a different mechanism and an increased risk of nerve injury.
- A-816** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Extent of Blockade along the Thigh after the Anterior and the Posterior Approach to the Lumbar Plexus** Philippe Biboulet, MD; Didier Morau, MD; Yves Ryckwaert, MD; Yves Barthelet, MD; Xavier Capevila, MD PhD, Department of Anesthesia and Critical Care A, Lapeyronie, Montpellier, France. The extent of blockade to the proximal part of the thigh was inconstant after the "3 in 1" block.
- A-817** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Relative Potencies of Ropivacaine and Bupivacaine for Peripheral Nerve Blocks** Andrea Casati, MD; Guido Fanelli, MD; Paolo Beccaria, MD; Luca Magistris, MD; Giorgio Torri, MD, Anesthesiology, IRCCS H San Raffaele, Milan, Italy. Producing an effective femoral nerve block in 50% of patients within 20 min from anesthetic injection required similar doses of either ropivacaine or bupivacaine
- A-818** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Comparison of Ropivacaine 0.2% and Lidocaine 0.5% for Intravenous Regional Anesthesia in Outpatient Surgery** Marcos Castro, MD; Carlos A. Ocampo, MD; David G. Silverman, MD; Thomas Halazinsky, MD; Peter G. Atanasoff, MD, Anesthesiology, Yale University School of Medicine, Yale-New Haven Hospital, New Haven, CT, United States. Ropivacaine is effective and safe for use in IVRA.
- A-819** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**A Comparison of Cardiovascular Effects during Spinal Anaesthesia of Three Different Intravenous Doses of Dihydroergotamine** Lester A.H. Critchley, MD, FFARCSI; David K. Woodward, MBBS, FRCA, Department of Anaesthesia & Intensive Care, Chinese University of Hong Kong, Prince of Wales Hospital, Shatin, New Territories, Hong Kong. Cardiovascular effects of dihydroergotamine during spinal anaesthesia in the elderly.
- A-820** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Effect of Prolonged Nerve Block on Inflammatory Hyperalgesia in Rats** Jean-Pierre C. Estebe, MD; Marc E. Gentili, MD; Pascal Le Corre, PharmD-PhD; Jean-Philippe Moulinoux, MD-PhD; Claude Ecoffey, MD, , Dept Anesth 2, University of Rennes, France. Bupivacaine could not prevent hyperalgesia. Prolongation of block with B-loaded microspheres ( $\pm$  dexamethasone) could prevent hyperalgesia.
- A-821** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**The Effect of Fentanyl on Bupivacaine-Morphine Spinal Anesthesia for Cesarean Sections** Richard Evans, MD; Robert Ascanio, MD, Department of Anesthesiology, Maine Medical Center, Portland, ME, United States. While bupivacaine, preservative-free morphine and fentanyl are commonly used for spinals during c-sections, the benefits of having both narcotics has yet to be studied.
- A-822** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Lysophosphatidic Acid Signaling Is Attenuated by Local Anesthetics in Human Neutrophils** Lars G. Fischer, MD; Beate Conrad, MS; Boris Krumm, MS; Markus W. Hollmann, MD; Marcel E. Durieux, MD, PhD, Anaesthesiologie und operative Intensivmedizin, Westf.-Wilhelms Universitaet, Muenster, Germany. Local anesthetics in clinical relevant concentrations attenuated responses due to lysophosphatidic acid.
- A-823** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Intrathecal Sufentanil Alone, with Epinephrine or Clonidine for Postoperative Analgesia after Total Hip Replacement** Roxane Fournier, MD; Zdravko Gamulin, MD; Anne Weber, MD; Elizabeth Van Gessel, MD, Division of Anesthesiology, University Hospitals, Geneva, Switzerland. Adding EPI 200 $\mu$ g or CLO 30 $\mu$ g to 7.5 $\mu$ g IT SUF does not modify its onset or duration of action.
- A-824** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Ropivacaine Vs. Bupivacaine for Postoperative Patient-Controlled Epidural Analgesia (PCEA)** Goetz F. Geldner, M.D.; Bernhard Leble, M.D.; Joerg Weinberger, M.D.; Leopold H.J. Eberhard, M.D.; Michael Georgieff, Prof., Anesthesia, University of Ulm, Ulm, Germany. A ropivacaine and bupivacaine combined with sufentanil PCEA will produce sufficient postoperative analgesia, but will cause a motoric blockade also.
- A-825** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**An Evaluation of Single Vs. Multiple Injections during Cervical Plexus Block (CPB) for Carotid Endarterectomy** M.E. Goldberg, MD; I. Gratz, DO; M. Afsbar, Pharm.D.; G.E. Larjani, Pharm.D.; E. Deal, Anesthesiology, UMDNJ-RWJMS at Camden, Camden, NJ, United States. Anesthesia for CEA maybe accomplished successfully using either single or multiple injections for Cervical Plexus Block.
- A-826** Room A, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Do Doppler Diastolic Filling Indices Differentiate among Local Anesthetic Cardiac Toxicities?** Leanne Groban, M.D.; Dwight D. Deal, B.S.; Jason C. Vernon, B.S.; John F. Butterworth, M.D., Anesth. Dept., Wake Forest Univ. Sch. of Med., Winston-Salem, NC, United States. Doppler echocardiographic indices of left ventricular filling define diastolic dysfunction with amide local anesthetic.