

**A-983** Room 301, 10/18/2000 9:00 AM - 10:30 AM (PD)  
**Prolonged Sciatic Nerve Blockade in Infant, Adolescent, and Adult Rats** Anjali Koka, AB; Nu Lu, BA; Benjamin H. Lee, MD; Daniel Kobane, MD, PhD; Charles B. Berde, MD, PhD, Dept. of Anesthesia, Children's Hospital, Boston, MA, United States. Bupivacaine-dexamethasone-polymer microspheres produce prolonged sciatic blockade. Infant rats have a lower LD50 and shorter block duration than adults.

**A-984** Room 301, 10/18/2000 9:00 AM - 10:30 AM (PD)  
**Effects of Bupivacaine and Ropivacaine on the High Voltage-Activated Calcium Currents of Rat Dorsal Horn Neurons** Baogang Liu, M.D., PhD; Xin-Liang Zhuang, M.D.; Sorin J. Brull, M.D.; Jun-Ming Zhang, M.S., M.D., Anesthesiology, Univ. of Arkansas for Medical Sciences, Little Rock, AR, United States. Patch clamp recordings from dorsal horn neurons showed that bupivacaine and ropivacaine inhibited calcium currents.

**A-985** Room 301, 10/18/2000 9:00 AM - 10:30 AM (PD)  
**CSF Bioavailability, Epidural and Intrathecal Disposition of Epidural Mixtures Containing Bupivacaine and Lidocaine in Rabbits** Jean-Marc Malinovsky, MD, PhD; Rozenn Clement, PharmD; Pascal Le Corre, PharmD, PhD; Francois Chevanne, BS; Roger Le Verge, PharmD, PhD, Department of Biopharmaceutics, School of Pharmacy, Rennes 1 University, Rennes, France. Lidocaine increases CSF bupivacaine bioavailability

**A-986** Room 301, 10/18/2000 9:00 AM - 10:30 AM (PD)  
**Spinal Mepivacaine and Prilocaine Are Less Neurotoxic Than Lidocaine in Rats** Tamie Takenami, MD; Saburo Yagishita, MD; Yoshibiro Nara, PhD; Sumio Hoka, MD, Anesthesiology, Kitasato Univ. School of Medicine, Sagamihara, Kanagawa, Japan. The histological damage during spinal anesthesia was more severe in lidocaine than prilocaine and mepivacaine.

### Local Anesthesia: Clinical

**A-987** Room 310, 10/18/2000 10:30 AM - 12:00 PM (PD)  
**Fentanyl Causes More Severe Pruritus When Administered Intrathecally with Procaine Compared to Lidocaine or Bupivacaine** Kathleen L. Larkin, MD; Michael F. Mulroy, MD; Afreen Siddiqui, MD, Anesthesiology, Virginia Mason Medical Center, Seattle, WA, United States. Fentanyl is associated with more frequent and severe pruritus when combined intrathecally with procaine compared to lidocaine.

**A-988** Room 310, 10/18/2000 10:30 AM - 12:00 PM (PD)  
**Intrathecal Anesthesia for Urological Procedures: Ropivacaine Versus Bupivacaine** Jean-Marc Malinovsky, MD, PhD; Florence Charles, MD; Ottmar Kick, MD; Jean-Yves Lepage, MD; Antoine Cozian, MD, Department of Anesthesia, Hotel-Dieu, Nantes, France. Ropivacaine (15 mg) produces similar motor effects but less potent anesthesia than bupivacaine (10 mg) for spinal anesthesia.

**A-989** Room 310, 10/18/2000 10:30 AM - 12:00 PM (PD)  
**Spinal Anesthesia with Tetracaine in 7.5% or 0.75% Glucose in Adolescents Versus Adults** Shinichi Sakura, MD; Keisbi Hashimoto, MD; Kousaku Toyota, MD; Katsushi Doi, MD, Dept of Anesthesiology, Shimane Medical University, Izumo, Japan. Adolescents developed a higher level of blockade than adults after spinal tetracaine in 7.5% glucose but not after the 0.75% glucose solution.

**A-990** Room 310, 10/18/2000 10:30 AM - 12:00 PM (PD)  
**Regional Anesthesia Does Not Increase the Risk of Postoperative Neuropathy in Patients Undergoing Ulnar Nerve Transposition** James R. Hebl, M.D.; Terese T. Horlocker, M.D.; Julie A. Katarincic, M.D.; Darrell R. Schroeder, M.S., Department of Anesthesiology, Mayo Clinic, Rochester, MN, United States. Regional anesthesia may be safely used in patients with pre-existing peripheral neuropathies.

**A-991** Room 310, 10/18/2000 10:30 AM - 12:00 PM (PD)  
**Outcome Not Improved by Suprascapular Nerve Block in Shoulder Surgery Patients Receiving Interscalene Block** Joseph M. Neal, MD; Susan B. McDonald, MD; Kathleen L. Larkin, MD; Peter S. Hodgson, MD, Department of Anesthesiology, Virginia Mason Medical Center, Seattle, WA, United States. Suprascapular nerve block (SSNB) is not a valuable adjunct to interscalene block for open shoulder surgery.

**A-992** Room 310, 10/18/2000 10:30 AM - 12:00 PM (PD)  
**Analgesic Effect of Interscalene Block Using Clonidine as a Sole Analgesic for Shoulder Arthroscopy** Henri Iskandar, MD; Joelle Raymond, MD; Gyslaine Cochard, MD; Bertrand Manaud, MD, Anesthesiology, Clinique Bordeaux-Merignac, Merignac, France. This study suggest that clonidine administered directly and alone to the interscalene plexus enhanced analgesia for shoulder arthroscopy.

**A-993** Room 310, 10/18/2000 10:30 AM - 12:00 PM (PD)  
**Bupivacaine or Ropivacaine to Maintain Continuous Interscalene Brachial Plexus Block (CIB) after Open Shoulder Surgery (OSS)?** Kayembe K. Kabongo, M.D.; Laurent Delaunay, M.D.; Antonio Foletti, M.D.; Francois J. Singelyn, M.D., PhD, Anesthesiology, St Luc Hospital, Brussels, Belgium. This study demonstrates that 0.1% bupivacaine and 0.2% ropivacaine are the most appropriate solutions to maintain CIB.

**A-994** Room 310, 10/18/2000 10:30 AM - 12:00 PM (PD)  
**Does the Sciatic Nerve Approach Have an Influence on the Tolerance of Thigh Tourniquet?** Francois J. Singelyn, MD, PhD; Pierre Hoffreumont, MD; Xavier Capdevila, MD, PhD, Anesthesiology, St Luc Hospital, Brussels, Belgium. This study demonstrates that Labat's approach of the sciatic nerve block provides no better tolerance of thigh tourniquet than the popliteal approach.

### Local Anesthesia: Pain - Clinical II

**A-995** Room 301, 10/18/2000 2:00 PM - 3:30 PM (PD)  
**Lack of Efficacy of Repetitive Epidural Steroid Injection Therapy in Patients with Lumbar Disc Herniation** William E. Ackerman, MD; Mahmood Ahmad, MD, Pain Medicine, Integrative Pain Medicine of Arkansas, Little Rock, AR, United States. Repetitive epidural steroid injection therapy does not prolong the duration of analgesia in patients with herniated lumbar discs with radiculopathy.

**A-996** Room 301, 10/18/2000 2:00 PM - 3:30 PM (PD)  
**The Efficacy of Low-Dose Ketamine in Addition to Postoperative Patient-Controlled Analgesia** Dong Hee Kim, M.D., Anesthesiology, College of Medicine, Dankook University, Cheonan, Choongnam, Korea. The addition of 50,100 mg of ketamine decreases 26-39% of patient-controlled analgesia drug consumption (butorphanol and ketorolac) and incidences of nausea and vomiting.