Response to “Comments on ‘Local Anesthetic Systemic Toxicity’”

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We appreciate Drs Onal, Saltali, and Apiliogullari1 discovering this error in Table 1 of our article.2 In producing Table 1, we indeed made the oversight of classifying articaine as an ester local anesthetic.

Ironically, we frequently teach our trainees a simple mnemonic to reliably determine local anesthetic class: if the root of the local anesthetic name contains the letter I, assume the local anesthetic is an amide as there is no I in the word ester, but there is in the word amide. For example, amide local anesthetics prilocaine, mepivacaine, ropivacaine, bupivacaine, and articaine all have the letter I prior to the -caine suffix. Procaine, cocaine, 2-chloroprocaine, and tetracaine do not and are ester local anesthetics. Four exceptions exist, but are not utilized frequently in clinical practice: piperocaine, isobucaine, dimethocaine, and risocaine.

The concise review of articaine’s unique structure, metabolism, and safety profile, as well as the authors’ correction, provide a welcome corollary to our publication.

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REFERENCES


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