

ANESTHESIA RISK DISCUSSION

All types of anesthesia involve some risk. Major side effects and complications from anesthesia are uncommon. Specific risks depend on your health, the type of anesthesia used, and your response to anesthesia.

Your age may be a risk factor. In general, the risks associated with anesthesia and surgery increase in older people. Serious medical conditions, such as heart, circulation, or lung problems, increase your risk of complications from anesthesia. Obesity, sleep apnea, and/or smoking also increase your risk of complications from anesthesia.

During your anesthetic, an anesthesia specialist will remain in the operating room with you monitoring your breathing, blood pressure, heart rate, and the depth of anesthesia. Your anesthesia specialist has been specially trained and is able to treat problems that may arise during your anesthetic.

Local anesthesia

When used properly, local anesthetics are safe and have few major side effects. However, in high doses, local anesthetics can have toxic effects caused by being absorbed through the bloodstream into the rest of the body. This may significantly affect your breathing, heartbeat, blood pressure, and other body functions.

Some procedures can be performed with local anesthesia and sedative medication through your "IV". An anesthesia specialist remains with you throughout the procedure and adjusts the level of medication you are receiving. This is sometimes referred to as "Twilight Anesthesia".

Regional anesthesia

For regional anesthesia, an anesthetic is injected close to a nerve, a bundle of nerves, or the spinal cord. In rare cases, nerve damage can cause persistent numbness, weakness, or pain.

Regional anesthesia (regional nerve blocks, epidural spinal anesthesia) also carries the risk of systemic toxicity if the anesthetic is absorbed through the bloodstream into the body. Other complications include heart or lung problems, and infection, swelling, or bruising at the injection site.

During spinal anesthesia, medication is injected into the fluid that surrounds the spinal cord (cerebrospinal fluid). The most common complication of spinal anesthesia is a headache caused by leaking of this fluid. With current techniques of giving spinal anesthesia, this occurs in about 1% to 2% of all people who have spinal anesthesia and is more common in younger people. A spinal headache may be treated quickly with a blood patch to prevent further complications. A blood patch involves injecting a small amount of the person's own blood into the area where the leak is most likely occurring to seal the hole and to increase pressure in the spinal canal and relieve the pull on the membranes surrounding the canal.

General anesthesia

Serious side effects of general anesthesia are uncommon in people who are otherwise healthy.

However, because general anesthesia affects the whole body, it is more likely to cause side effects than local or regional anesthesia. Fortunately, most side effects of general anesthesia are minor and manageable.

During general anesthesia, the entire body relaxes. Because this occurs in the air passages as well, an artificial airway is needed to allow clear passage of oxygen into your lungs. Insertion or removal of airways may cause respiratory problems such as coughing; gagging; or muscle spasms in the voice box, or in the lungs. Other complications may include damage to teeth and lips, sore throat, and hoarseness caused by injury or irritation of the voice box. Typically, the only problem you may have is a mild sore throat for a couple of days after surgery.

General anesthesia suppresses the normal throat reflexes such as swallowing, coughing, or gagging that prevent aspiration. Aspiration occurs when an object or liquid is inhaled into the respiratory tract (the windpipe or the lungs). Aspiration during anesthesia and surgery is very uncommon. People are usually instructed not to eat or drink anything for a specific number of hours before anesthesia so that their stomach is empty to reduce this risk. Anesthesia specialists use many safety measures to minimize the risk of aspiration in all patients.

Other serious risks of general anesthesia include changes in blood pressure or heart rate or rhythm, heart attack, or stroke. Death, serious illness, or injury, due solely to anesthesia, is rare and is usually also related to complications from the surgery. Death occurs in approximately 1 in 250,000 people receiving general anesthesia. Risks are greater for those people with serious medical conditions.

Some people having general anesthesia express concern that they will not be completely unconscious but will “wake up” and have some awareness during the surgical procedure. Awareness during general anesthesia is very rare. Anesthesia specialists devote careful attention and use many methods to prevent you from “waking up”

Risks from reactions to anesthetic medications

Some anesthetic medications may cause allergic or other abnormal reactions in some people, but these are rare. If you suspect you may have such a problem, you should bring this to the attention of both your surgeon and the anesthesia specialist well before your surgery.

A rare, potentially fatal condition called malignant hyperthermia (MH) may be triggered by some anesthetics. The anesthetics most commonly associated with malignant hyperthermia include the potent inhalation anesthetics and the muscle relaxant succinylcholine.

The most common reaction to general anesthetics is nausea and vomiting. If you have had problems with this in the past, let the anesthesiologist know. Please pay close attention when completing the “*Anesthesia Preoperative Questionnaire*”. The questionnaire asks the detailed questions necessary to provide you with the best of care and to minimize the risks associated with your anesthetic procedure.

Day of Surgery

On the day of surgery, you will be asked to sign a consent form for anesthesia. You will have the opportunity to ask the anesthesiologist questions about your specific anesthetic procedure at that time.