

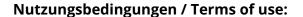


Thoracic epidural anaesthesia (TEA) reveals benefits in patients undergoing radical prostatectomy

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Background and goal of study: Patients requiring prostatectomy are often aged and have coexisting cardiopulmonary diseases ^[1], increasing the risk of perioperative complications. The aim of the present study was to evaluate our perioperative anaesthesiological regimen over the last 4 years in terms of safety and patients' comfort.

Material and methods: Records of 433 patients who underwent radical prostatectomy (rPE) between 1994 and 1998 in our hospital were retrospectively reviewed. Patients were divided into those who received general anaesthesia (GA) alone, a combination of lumbar epidural anaesthesia (LEA) + GA or TEA + GA. This study was performed according to the Helsinki Declaration.

Results: Demographic data (age, BMI, ASA classification, HR, MAP) were comparable among the groups.

Intraoperative data: <u>TABLE 1</u>

rPE (n=433)	GA (n=186)	LA+GA (r=119)	TEA+G (r)=128)
Fertanyi (mg b ⁻¹)	0.20 ± 0.01	0:14 ± .01	0.11 ± 0.01
Tachycardia (phases)			2
Hypertension (phases)	76	8	2

Table

Postopoerative data: TABLE 2



Table

Complications: **TABLE 3**



Table

Conclusion: Combination of GA and epidural anaesthesia, especially TEA, appears to improve perioperative care of patients undergoing major abdominal surgery in terms of patients safety and comfort.

Reference:

1 Litz R, Bleyl JU, Frank M, Albrecht DM. Combined anaesthesia procedures. *Anaesthesist* 1999; **48:** 359-372.