Preoperative Parental Anxiety is not Associated with Postoperative Emergence Agitation in Children Undergoing Adenoidectomy and/or Tonsillectomy

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Abstract : Background: Emergence agitation (EA) is defined as a dissociated state of consciousness during the early post-anesthesia period in which the child is inconsolable, irritable, uncompromising or uncooperative, typically thrashing, crying, moaning, or incoherent, and not recognizing or identifying familiar and known objects or people. Some studies found preoperative parental anxiety to be a predictor of EA. Methods: Seventy-four children, between the ages of 3-12 undergoing adenoidectomy/tonsillectomy at Ege University Hospital, were studied. Anesthesia was induced and maintained using 2% sevoflurane in 50% oxygen and 50% air following a premedicative dose of 0.5mg/kg oral midazolam. After the children were taken into the operating theater, the mothers were given the State-Trait Anxiety Inventory (STAI) questionnaire. To evaluate EA, Post Anesthetic Emergence Delirium (PAED) score of the children were noted every 10min during the first 30min of the postoperative period. EA was defined with a highest PAED score of ≥ 10, and non-EA with a highest PAED score of ≤ 9. Results: In this study, the incidence of postoperative EA was 31% (34% under the age of 6 and 19% over). Mothers of children with EA were found not to be significantly more anxious on STAI compared to mothers of non-EA children. Conclusions: Contrary to some earlier studies, we were unable to find an association between preoperative parental anxiety and postoperative EA.

Keywords: parental anxiety, emergence agittion, Post Anesthetic Emergence Delirium, anesthesia

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