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AN OBSERVATIONAL STUDY OF INDUCTION WITH ETOMIDATE INPATIENTS WITH CARDIAC DISEASES AND HAEMODYNAMICALLY COMPROMISED PATIENTS

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ABSTRACT

Background and Aims: A wide variety of induction agents, like etomidate, thiopentone, propofol, ketamine and midazolam have been used for anaesthetizing patients with cardiac disease. The primary aim of our study is to evaluate the haemodynamic changes after single dose of etomidate in cardiac and haemodynamically compromised patients. The objectives are to observe haemodynamic changes, to know the duration of inotropic support needed postoperatively, to find the incidence of seven day morbidity & mortality and complications after single induction dose of etomidate in such patients.

Materials & Methods: This is a prospective observational study to know the effect ofinduction with etomidate in cardiac and haemodynamically compromised patients. Seventy patients of both sex of NYHA grade III or IV undergoing surgeries after induction with etomidate were taken for the study. All patients were induced with Inj. etomidate 0.3mg/kg over 60 to 90 sec and inj. Succinylcholine 2mg/kg was given to facilitate intubation. Haemodynamics changes i.e., pulse rate, systolic blood pressure, diastolic blood pressure, mean atrial pressure and oxygen saturation were recorded in the awake state, after 1 min of induction, after 5 mins, after 10 minutes,after that every 30min till the end of surgical procedure. Complications if any were recorded. All the data were recorded in Microsoft Excel 2007.Mean as well as Standard Deviation (SD) were calculated .Statistical analysis were done by percentage.

Result: There is no significant changes in pulse rate, systolic blood pressure and diastolic blood pressure, andmean arterial pressure. Number of patients requiring inotrope support are very less (3.7 %) and the duration was up to 40 hours.There were no significant complications with etomidate. Mortality was 14.8% which is comparable to other induction agents. Thusetomidate is an acceptable and safe as single-dose induction agent in cardiac disease patients and patients who are haemodynamically compromised.

Key words: Etomidate, cardiac disease, haemodynamically compromised, inotrope

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