

ANESTHESIOLOGIC PROCEDURES FOR PERCUTANEOUS 0203 DISCOLYSIS

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Patients who undergo percutaneous discolysis with 0203 because of lumbar or cervical disk herniation are managed by sedation, in order to allow the surgeon to constantly control symptoms, without making the patient feel pain.

Since 5 years we have focused a specific protocol, recently modified.

Visited for the first time about 10 days before discolysis, the patient is admitted in the Hospital the day before the procedure for general examinations.

The evening before surgery the patient receives either Flunazepam 15mg or Dopiclone 7.5mg.

One hour before surgery Diazepam 6 to 8 mg is administered per os.

In the operative room a vein is cannulated, and Cardiac ECG, blood oxygen saturation, and arterial pressure are monitored.

5 minutes before discolysis Fentanyl 50 to 75 ng is administered by venous injection plus droperidol 2.5mg.

During the procedure 2 to 2.5 mg of Midazolam are injected, and if needed a dose of 20 to 25 mg of Propofol is added at the moment of ozone introduction in the disk.

Cardiac ECG, respiration (Oxygen saturation) and arterial blood pressures are monitored during the entire procedure and in the first ten minutes in the recovery room.

We underline the importance of performing these procedures in structures where the complete patient monitoring is possible, with oxygen sources, reanimatory material and specialized personnel.