



Introduction

- Anaesthetic gases = 5% carbon footprint^{1,2}
- Desflurane is most harmful and expensive
- N2O >75% of carbon impact^{1,2}
- Paediatric theatres important area for change – less routine use TIVA³ and high proportion inhalational inductions

SMART Aim

- Ensure desflurane and N2O use for maintenance of anaesthesia in < 5% cases
- Achieve low flow anaesthesia in 95% of cases

1st PDSA Cycle - pre intervention (pre covid)

- Gassing greener app
- Individual carbon footprint per theatre



- 15 cases; 4 theatres
- Induction

- 13% IV induction (n=2)
- 87% gas induction (n=13)

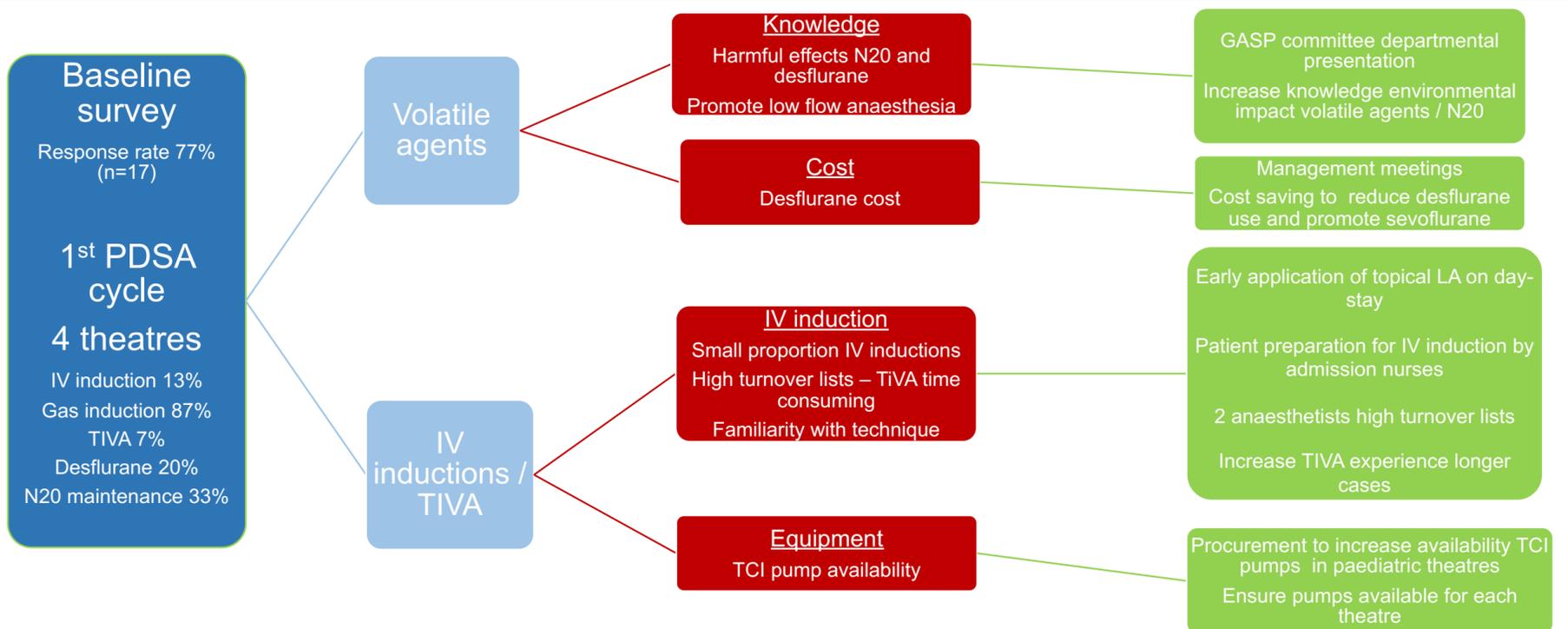
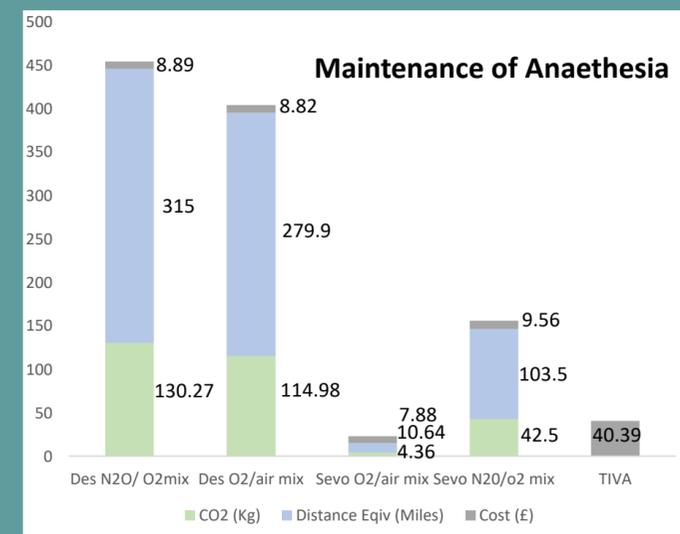
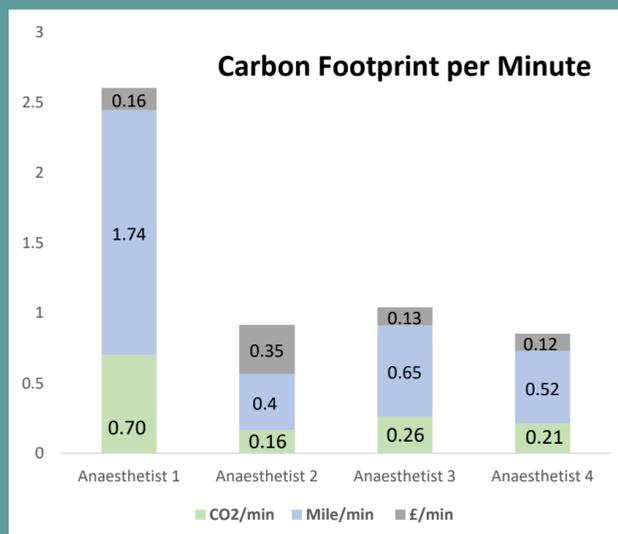
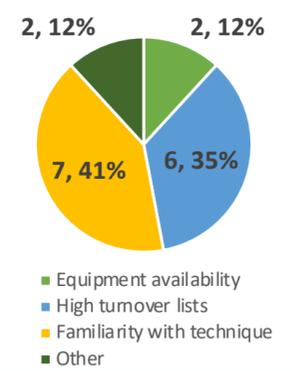
- Maintenance

- 93% volatile (n=14)
- 20% desflurane (n=3); 33% N2O (n=5)
- 7% TIVA; (n=1)

Method

- Tertiary paediatric anaesthetic department
- Baseline survey anaesthetic practice.
- Response rate 77% (n=17)
 - 36% use desflurane for maintenance (18% daily)
 - List efficiency / faster wake-up
 - 42% use N2O for maintenance (24% weekly)
- TIVA frequency
 - 47% weekly / 35% monthly
 - Main reason: previous PONV / myopathy
 - Barriers – lack of equipment driving lack of familiarity. Theatre managers driving list efficiency / turnover
- Baseline PDSA cycle / Identify drivers for change

Barriers to TIVA use



2nd PDSA cycle – post intervention (pre covid)

58 cases; 4 theatres

- Induction
 - 29% IV induction (n=17)
 - 71% Inhalational (n=41)
- Maintenance
 - 1.7% Desflurane (n=1)
 - 5.2% N2O maintenance (n=3)
 - 3.4% TIVA (n=2)
 - Remainder sevoflurane / air
- Flow <1 L/minute in 100% cases

3rd PDSA cycle - post intervention (post covid)

25 cases; 4 theatres

- Induction
 - 44% IV induction (n=11)
 - 56% inhalational (n=14)
- Maintenance
 - 0% Desflurane (n=0)
 - 4% N2O maintenance (n=1)
 - 12% TIVA (n=2)
 - Remainder sevoflurane / air
- Flow <1L/minute in 100% cases

Average CO2 produced per minute by anaesthetists pre-education vs post education



Future Work

- Ensure changes sustained
 - Education sessions 3-months for rotating trainees
 - Permanent staff involvement ODPs and consultant leads
- Co-existing project by ODPs – reduce plastic + increase recycling
- Assess impact of COVID-19
 - Reduce exposure to virus by promoting IV induction
 - Shorter patient lists to allow cleaning / PPE
 - Time to promote TIVA use / reduce desflurane
- Increase TIVA and IV inductions
- TCI pumps from clinical engineering to ensure 2 per theatre

References

- The Royal College of Anaesthetists. Environment and Sustainability. <https://www.rcoa.ac.uk/about-college/strategy-vision/environment-sustainability>. Last accessed 27th January 2020.
- Charlesworth M and Swinton F. Anaesthetic gases, climate change, and sustainable practice. The Lancet. 2017; 1 (6): 216 – 217.
- Goh N, Bagshaw O, Courtman S. A Follow up Survey of Total Intravenous Anaesthesia Usage in Children in the UK and Ireland. 2018: 29 (4). 10.1111/pan.13556