



## Anaesthesia for Paediatric Eye Surgery

1.  
What factors alter intra ocular pressure?
2.  
Describe your anaesthetic technique for measurement of IOP and explain your reasoning.
3.  
Are there any potential adverse effects of the use of suxamethonium in paediatric eye surgery?
4.  
In what scenario is antibiotic prophylaxis for bacterial endocarditis required?
5.  
Describe the oculocardiac reflex and techniques for preventing it.
6.  
List some common post-operative issues in paediatric eye surgery and techniques that can be employed to prevent them?
7.  
What contraindications are there to the use of nitrous oxide in paediatric eye surgery?



## Useful Reading:

1. Anaesthesia Tutorial of the Week 144. Anaesthesia for Paediatric Eye Surgery.

<http://www.frca.co.uk/Documents/144%20Anaesthesia%20for%20paediatric%20eye%20surgery.pdf>

2. James, Ian. Anaesthesia for Paediatric Eye Surgery. *Continuing Education in Anaesthesia, Critical Care & Pain* 2008; 8(1): 5-10

3. Lord, Jonathan. Anaesthesia for eye surgery in paediatrics. *Anaesthesia & Intensive Care Medicine*. 2007; 8 (9): 393-396

Increase IOP	Decrease IOP	Minor/No effect on IOP
Suxamethonium	Propofol, Thiopentone	Ketamine
Hypoxia	Halothane, Sevoflurane, Isoflurane, Desflurane	Opioids
Hypercapnia	Acetazolamide, mannitol	Atropine
Laryngoscopy, coughing, straining, crying	Hypothermia	NDMR
Increased venous pressure	Hypocapnia	
External pressure		

Disclaimer: These questions were written by Dr James Quinn and are designed to stimulate discussion and further reading. They do not represent the views of the Royal College of Anaesthetists. Please email [alysoncalder@doctors.org.uk](mailto:alysoncalder@doctors.org.uk) with any questions or comments.