Essentials of Neuroanesthesia



Edited by **Hemanshu Prabhakar**



ESSENTIALS OF NEUROANESTHESIA

ESSENTIALS OF NEUROANESTHESIA

Edited by

Hemanshu Prabhakar Department of Neuroanaesthesiology and Critical Care All India Institute of Medical Sciences New Delhi, India





ACADEMIC PRESS

elsevier.com

Academic Press is an imprint of Elsevier 125 London Wall, London EC2Y 5AS, United Kingdom 525 B Street, Suite 1800, San Diego, CA 92101-4495, United States 50 Hampshire Street, 5th Floor, Cambridge, MA 02139, United States The Boulevard, Langford Lane, Kidlington, Oxford OX5 1GB, United Kingdom

Copyright © 2017 Elsevier Inc. All rights reserved.

No part of this publication may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying, recording, or any information storage and retrieval system, without permission in writing from the publisher. Details on how to seek permission, further information about the Publisher's permissions policies and our arrangements with organizations such as the Copyright Clearance Center and the Copyright Licensing Agency, can be found at our website: www.elsevier.com/permissions.

This book and the individual contributions contained in it are protected under copyright by the Publisher (other than as may be noted herein).

Notices

Knowledge and best practice in this field are constantly changing. As new research and experience broaden our understanding, changes in research methods, professional practices, or medical treatment may become necessary.

Practitioners and researchers must always rely on their own experience and knowledge in evaluating and using any information, methods, compounds, or experiments described herein. In using such information or methods they should be mindful of their own safety and the safety of others, including parties for whom they have a professional responsibility.

To the fullest extent of the law, neither the Publisher nor the authors, contributors, or editors, assume any liability for any injury and/or damage to persons or property as a matter of products liability, negligence or otherwise, or from any use or operation of any methods, products, instructions, or ideas contained in the material herein.

Library of Congress Cataloging-in-Publication Data

A catalog record for this book is available from the Library of Congress

British Library Cataloguing-in-Publication Data

A catalogue record for this book is available from the British Library

ISBN: 978-0-12-805299-0

For information on all Academic Press publications visit our website at https://www.elsevier.com/books-and-journals



www.elsevier.com • www.bookaid.org

Publisher: Mara Conner Acquisition Editor: Melanie Tucker Editorial Project Manager: Kristi Anderson Production Project Manager: Edward Taylor Designer: Maria Ines Cruz

Typeset by TNQ Books and Journals

Dedicated to my parents—Avinash and Kanti Prabhakar The best gifts they stored for me—Kavita and Hemant, who in turn gifted me Sunil and Deepali To those who mean the world to me—Pallavi, Anavi, and Amyra To Aishwarya, Avi, and Anav

Contents

List of ContributorsxviiForewordxixPrefacexxiiAcknowledgmentsxxiiiIntroduction and Brief History of NeuroanesthesiaW. S. JellishXxvXxv

I

NEUROANATOMY

1. Neuroanatomy D. GUPTA

Introduction
Embryological Differentiation of Different Parts of Brain
Anatomy of Brain
Vascular Supply of the Brain
The Meninges and Cerebrospinal Fluid
Acknowledgment
References

2. Neuroembryology G.P. SINGH

Formation of Zygote
Formation of Blastocyst
Formation of Embryonic or Germ Disc
Formation of Definitive Notochord
Development of Nervous System
References

3. Blood–Brain Barrier

Introduction
Permeability at the Blood–Brain Barrier
Cellular and Molecular Effects of Anesthetics on the
Blood–Brain Barrier
Clinical and Experimental Implications of Anesthetics
on the Blood–Brain Barrier
Conclusion
References

II NEUROPHYSIOLOGY

4. Neurophysiology

M. SETHURAMAN

Intracranial Pressure	62
Introduction	62
Normal Intracranial Pressure	62
Cerebral Compliance	62
Importance of Intracranial Pressure	63
Summary	68
Cerebral Blood Flow	68
Introduction	68
Vascular Anatomy	68
Summary	74
Brain Metabolism	74
Introduction	74
Normal Cerebral Metabolism	74
Summary	79
Cerebrospinal Fluid	79
Introduction	79
Ventricular System	79
Summary	83
The Spinal Cord	83
Introduction	83
Anatomy	84
Organization of the Spinal Cord	84
Summary	89
References	89

5. Brain Protection in Neurosurgery

45 5. Brain P 50 H. EL BEHEIRY

	Introduction	91
	Nonpharmacological Strategies	91
	Mild Hypothermia	92
	Blood Pressure Control	93
51	Induced Arterial Hypertension	94
51	Normoglycemia	94
	Target Hemoglobin Concentration	95
52	Pharmacological Strategies	96
	Nonanesthetic Agents	97
54	Anesthetic Agents	97
56	Conclusion	98
56	References	98

CONTENTS

Ш NEUROPHARMACOLOGY

6. Neuropharmacology

P. GANJOO AND I. KAPOOR

Anesthetic Drugs and Sedatives	104
Intravenous Anesthetic Agents	104
Inhalational Anesthetic Agents	111
Neuromuscular Blocking Agents	115
Local Anesthetic Agents	116
Miscellaneous Drugs	116
Future Directions in Neuropharmacology	116
Conclusion	116
References	118

7. Anesthetic Agents: Neurotoxics or Neuroprotectives?

J. FIORDA-DIAZ, N. STOICEA AND S.D. BERGESE

Introduction	123
Pharmacological Considerations	124
Anesthesia Practice: Clinical Outcomes	126
Anesthesia and Fragile Brain	127
Conclusion	127
Abbreviations	128
References	128

IV

NEUROMONITORING

8. Neuromonitoring

V.J. RAMESH AND M. RADHAKRISHNAN

Introduction
Cerebral Blood Flow
Transcranial Sonography
Thermal Diffusion Flowmetry
Laser Doppler Flowmetry
Intra-Arterial ¹³³ Xenon
CT Perfusion
Xenon Enhanced CT
Positron Emission Tomography
Single Photon Emission Computed Tomography
Magnetic Resonance Imaging
Intracranial Pressure
Electroencephalogram
Evoked Potential Monitoring
Motor Evoked Potentials
Depth of Anesthesia
Cerebral Oxygenation Monitoring
Jugular Venous Oximetry
Regional Cerebral Oximetry
Brain Tissue Oxygen Monitoring

Cerebral Microdialysis

Conclusion	159
References	159

158

9. Multimodal Monitoring

A. DEFRESNE AND V. BONHOMME

Introduction	161
Temperature	162
Oxygen Transport, Hemodynamics, and Brain	
Metabolism	162
Intracranial Pressure Monitoring	171
Electroencephalography and Depth of Anesthesia	
Monitoring	173
Miscellaneous	174
Integration of Information and Decision-	
Helping Systems	175
Clinical Pearls	176
References	176

V

POSITIONS IN NEUROSURGERY

- 10. Positioning in Neurosurgery
- G. SINGH

139

140 140 140

140

143 145

156

Introduction	184
Historical Background	184
Principles of Positioning	184
The Conduct of Positioning	185
Surgical Approach for Craniotomies	186
Positioning for Craniotomy	187
Positions Used for Craniotomies	189
Surgical Approach for Procedures of the Spine	195
Patient Positioning For Spinal Procedures	195
Conclusion	203
Abbreviations	203
References	204

VI PREANESTHETIC EVALUATION

11. Preanesthetic Evaluation of Neurosurgical Patients

- R. MARIAPPAN
- 149 -

1 12		
150	Introduction	209
152	Preoperative Evaluation of Patient-Related Risk Factors	210
152	Preoperative Evaluation of Specific	
154	Neurosurgical Conditions	217
156	References	225

VII NEUROSURGERY

12. Supratentorial Lesions

H. BHAGAT AND S. MAHAJAN

Introduction	231
Classification	232
Pathophysiology and Clinical Correlations	233
Clinical Features	235
Neuroimaging	235
Intraoperative Considerations: The Team	
Approach	236
Anesthetic Management	236
Intraoperative Management	238
Emergence From Anesthesia	240
Postoperative Management	241
Awake Craniotomy	242
Conclusions	245
Acknowledgment	245
References	245

13. Emergence From Anesthesia

M. ECHEVERRÍA, J. FIORDA-DIAZ, N. STOICEA AND S.D. BERGESE

14. Anesthesia for Posterior Fossa Surgery

K. SANDHU AND N. GUPTA

Introduction
Anatomy
Clinical Presentation
Perioperative Management of Patients for Posterior
Fossa Surgery
Venous Air Embolism
Postoperative Management
Complications
Abbreviations
References

15. Transesophageal Echocardiography

A. LELE AND V. KRISHNAMOORTHY

Introduction
Basics of Transesophageal Echocardiography
Summary
References

16. Anesthesia for Epilepsy Surgery

N. GUPTA

	Introduction	285
	Surgical Management of Epilepsy	286
	Types of Surgical Treatment	286
	Presurgical Evaluation	287
	Anesthesia for Epilepsy Surgery	288
L	Effect of Anesthetic Agents in Patients With Epilepsy	288
2	Antiepileptic Drug Interactions	290
3	Preanesthetic Evaluation and Preparation	291
5	Anesthetic Management of Preoperative Procedures	292
)	Anesthesia for Intracranial Electrode Insertion	294
	Anesthetic Management of Resection of Seizure Focus	295
5	Awake Craniotomy	295
5	Resection of Epileptogenic Focus Under General	
3	Anesthesia	300
)	Neurostimulation for Drug-Resistant Epilepsy	301
L	Anesthetic Management of the Patient With	
2	Epilepsy for Incidental Surgery	302
5	Abbreviations	303
5	References	304

17. Refractory Status Epilepticus

M. PANEBIANCO AND A. MARSON

Introduction	309
Epidemiology	309
Classification	310
Cause	310
Pathophysiology	311
Diagnosis	311
Management	311
Treatment	312
Conclusions	313
References	314

18. Aneurysmal Subarachnoid Hemorrhage

C. MAHAJAN

247

255 255 256 256	History Introduction Clinical Presentation and Diagnosis Grading of Subarachnoid Hemorrhage Initial Management Concerns in Neurocritical	316 316 317 319
264 271 272 272 273	Care Unit Timing of Surgery Clipping or Coiling Evaluation of a Patient With Subarachnoid Hemorrhage for Anesthesia Anesthetic Management Temporary Clipping and Brain Protection Strategy	321 327 327 328 328 328 330
277 277 283 283	Intraoperative Aneurysm Rupture Giant Aneurysms and Circulatory Arrest Endovascular Management for Aneurysm Ablation Postoperative Management of Patients Conclusion References	330 331 331 333 333 333 333

1	x	

CONTENTS

19. Circulatory Arrest		Rapid Ventricular Pacing–Assisted Cerebral Blood
D.E. TRAUL		Flow Arrest
		References
Introduction	339	
Deep Hypothermic Circulatory Arrest	339	22. Neuroendocrine Lesions
Anesthesia Management	340	P.K. BITHAL
Complications	341	
Adenosine-Induced Circulatory Arrest	341	Hypothalamic-Pituitary–Adrenal
Anesthesia Considerations	342	Axis Evaluation
Complications	342	Neuroendocrine Response Related to
Summary	342	Anesthesia and Surgery
References	343	Pituitary Gland Adenomas
References	515	Physiology of Pituitary Gland
20. Cerebrovascular Disease		Endocrine Diseases
20. Cerebrovascular Disease		Nonfunctioning Tumors
M. ABRAHAM AND M. MARDA		-
T 1 1 T T 1	246	Intraoperative Considerations
Intracerebral Hemorrhage	346	Advantages of Endoscopic Endonasal
Incidence and Risk Factors	346	Approach
Imaging	346	Relative Contraindications to
Clinical Presentation	346	Transsphenoidal Approach
Management of Intracerebral Hemorrhage	348	Intraoperative Issues
Arteriovenous Malformations	352	Disorder of Water and Electrolytes
Cause and Incidence	352	References
Natural History	353	
Pathophysiologic Effects and Clinical Presentation	353	23. Pituitary Apoplexy
Grading of Arteriovenous Malformations	353	S.S. THOTA
Imaging	354	
Cerebral Hemodynamics in Arteriovenous		Clinical Features
Malformation	354	Management
Management	354	References
Surgical Resection of Arteriovenous Malformation	355	
Anesthetic Considerations for Resection of		24. Spinal Surgery
Arteriovenous Malformation	355	M.S. TANDON AND D. SAIGAL
Postoperative Management	356	M.3. TANDON AND D. SAIOAL
Anesthetic Considerations for Arteriovenous		Introduction
Malformation Embolization	356	Spine
Complications During Arteriovenous Malformation		Types of Spine Surgeries
Embolization	357	Surgical Approaches to the Spine
Pediatric Arteriovenous Malformations	357	Common Spine Disorders
Pregnancy and Arteriovenous Malformations	358	Imaging in Spine Lesions
Vein of Galen Aneurysmal Malformations	358	Positioning for Spine Surgeries
Dural Arteriovenous Fistula	360	Neurophysiological Intraoperative Monitoring
Clinical Presentation	360	During Spine Surgeries
Management	360	
Carotid Endarterectomy	360	Preanesthetic Assessment and Optimization
-		Anesthesia Management
Preoperative Evaluation	362	Postoperative Management
Management of Carotid Artery Disease	362	Special Considerations
Monitoring	362	Conclusion
Intraoperative Management	363	References
Postoperative Complications and Outcomes	363	
Coronary Angioplasty and Stenting	363	25. Postoperative Visual Loss
Moyamoya Disease	363	K.M. KLA AND L.A. LEE
Management of Moyamoya Disease	364	
References	364	Introduction
		Central Retinal Artery Occlusion
21. Flow Arrest in Cerebrovascular Surgery		Ischemic Optic Neuropathy
M.L. JAMES, MA. BABI AND S.A. KHAN		Cortical Blindness
• • • · · · · · · · · · · · · · · · · ·		Recent Advances
Deep Hypothermic Circulatory Arrest	367	Conclusion
Adenosine-Assisted Cerebral Blood Flow Arrest	370	References

486

26. Neuroendoscopy

S. MONINGI AND D.K. KULKARNI

Introduction Anesthetic Goals and Management	447 450
Anesthetic Management of Specific	
Neuroendoscopic Procedures	453
Advances in Neuroendoscopy	466
Conclusion	467
Clinical Pearls	467
References	468

27. Pressure Inside the Neuroendoscope

N. FÀBREGAS AND L. SALVADOR

Introduction	471
Indications and Procedures	471
How Do Neurosurgeons Perform an	
Intraventricular Endoscopic Procedure?	472
Anesthetic Procedure: What to Take Into Account?	473
Perioperative Complications	475
Conclusion	477
References	477

28. Anesthesia for Functional Neurosurgery S.K. DUBE

Introduction	
Procedure	
Anesthetic Consideration	
Anesthetic Techniques	
Complications	
Anesthesia in Patients With Deep Brain Stimulator In Situ	
Conclusion	
References	

29. Awake Craniotomy

P.H. MANNINEN AND T. Y. YEOH

Introduction	489
Patient Selection	490
Awake Craniotomy for Tumor Surgery	490
Awake Craniotomy for Epilepsy	496
Conclusion	499
References	499

VIII NEURORADIOLOGY

30. Anesthesia for Neuroradiology

K. SRIGANESH AND B. VINAY

	Anesthetic Management of Endovascular Coiling	510
	Anesthetic Management of Endovascular Embolization of	
	Arteriovenous Malformation, Arteriovenous	
7	Fistula, and Vein of Galen Malformation	513
)	Anesthesia for Stroke Interventions	514
	Issues Related to Radiation During Neurointervention	515
;	Anesthesia for Stereotactic Radiosurgery	516
5	Pregnancy and Neuroradiology	516
7	Clinical Pearls	517
7	References	517

31. Magnetic Resonance Imaging: Anesthetic Implications

F. RABAI AND R. RAMANI

Introduction: The Road From X-Ray to Magnetic	
Resonance Imaging	519
Principles of Nuclear Magnetic Resonance and Magnetic	
Resonance Imaging	521
Various Types of Signals Recorded	522
Hazards Related to Magnetic Resonance Imaging	524
Magnetic Resonance Imaging Safety:	
General Considerations	526
Magnetic Resonance Imaging Safety: Management of Cardiac	
Implantable Electronic Devices and Other	
Implantable Devices	527
Anesthesia for Magnetic Resonance Imaging	530
Research Applications/Emerging Clinical	
Applications of Magnetic Resonance Imaging	531
References	532

IX NEUROTRAUMA

32. Neurotrauma

D. PADMAJA, A. LUTHRA AND R. MITRA

T 20		
490	Traumatic Brain Injury	536
496	Introduction	536
499	Definition	536
499	Epidemiology	536
	Classification of Traumatic Brain Injury	537
	Physiologic Response to Brain Injury	543
	Neuroimaging	545
	Severity of Traumatic Brain Injury	549
	Management of Traumatic Brain Injury	549
	Outcome	559
	Emerging Treatment Modalities	559
	Conclusion	560
	Spine and Spinal Cord Trauma	560
	Introduction	560
505	Epidemiology	560
506	Classification of Spinal Injury	561
506	Pathophysiology of Spinal Cord Trauma	563
506	Systemic Complications of Spinal	
510	Cord Injuries	565

xi

xii

Management of Spine and Spinal Cord Injury Emerging Treatment Modalities References

33. Biomarkers in Traumatic Brain Injury J. ŽUREK

Introduction Conclusion References

Χ

NEUROINTENSIVE CARE

34. Neurological Critical Care

G.S. UMAMAHESWARA RAO AND S. BANSAL

Introduction	595
History of Neurocritical Care	596
Design of a Neurocritical Care Unit	596
Clinical Conditions Requiring Admission to	
Neurocritical Care Unit	596
Justification for Neurological Critical Care Units	596
Pathophysiological Issues in Neurological Critical Care	597
Management of Patients in a Neurological	
Intensive Care Unit	598
Management of General Systemic Physiology	598
Specific Therapeutic Issues in Individual	
Clinical Conditions	603
Advanced Neuromonitoring	603
Outcomes of Neurological Intensive Care Unit	606
End-of-Life Issues in Neurological Critical Care	606
Clinical Pearls	608
References	608

35. Antibiotics: Prophylactic and Therapeutics S. ERB, L.A. STEINER AND C. OETLIKER

Introduction	613
Principles of Antimicrobial Therapy in Neurosurgery	613
Treatment of Central Nervous System Infections in the	
Neurosurgical Patient	616
Antimicrobial Prophylaxis in Neurosurgery	620
References	623

XI SPECIAL CONSIDERATIONS

36. Pediatric Neuroanesthesia G.P. RATH

Overview	629
Pediatric Neurophysiology	629
General Principles of Pediatric Neuroanesthesia	630

CONTENTS

587

590

590

567	Intraoperative Management	631
578	Postoperative Considerations	633
582	Management of Specific Conditions	633
	Conclusion	641
	References	641

37. Fluid and Blood Transfusion in Pediatric Neurosurgery

S. RAJAN AND S. RAO

Introduction	643
Fluid and Electrolyte Choices	644
Type of Fluids for Perioperative Administration in	
Pediatric Patients	645
Fluid Management in Pediatric Neurosurgery	645
Osmotherapy	646
Fluid and Electrolyte Disturbances in Pediatric	
Neurosurgery	647
Blood Transfusion	647
Blood Components	648
Special Situations	649
Epilepsy Surgery	649
Scoliosis	649
Conclusion	650
References	650

38. Geriatric Neuroanesthesia

S. TRIPATHY

Introduction	653
Implications of Surgical Stress and Anesthesia	
on the Elderly	653
Neurosurgical Concerns Unique to the Elderly	654
Conclusion	658
References	658

39. Postoperative Cognitive Dysfunction

A. BOROZDINA, L. PORCELLA AND F. BILOTTA

661
661
663
664
664
665
666
666

40. Pregnancy

V. SINGHAL

Requirement of Neurosurgery During Pregnancy	670
Physiological Alterations During Pregnancy	671
Effect of Anesthetic Agents on Fetal Outcome	673
Uteroplacental Drug Transfer and Neonatal Depression	674
Timing and Method of Delivery	675
Anesthetic Considerations During Pregnancy	675
Induction: Rapid Sequence Versus Slow Neuroinduction	676
Combined Cesarean Delivery and Neurosurgery	678

Intracranial Pressure and Regional Anesthesia
Postoperative Management
Anesthesia for Interventional Neurosurgical Procedures
References

41. Cerebral Venous Thrombosis

E.E. SHARPE AND J.J. PASTERNAK

Definition
Venous Anatomy
Incidence of Cerebral Venous Thrombosis
Risk Factors
Pathophysiology
Clinical Manifestations
Diagnostic Evaluation
Treatment
Anesthetic Management
Prognosis
Conclusion
References

42. Neurosurgical Anesthesia in Patients With Coexisting Cardiac Disease

S. SRIVASTAVA AND A. KANNAUJIA

Introduction	693
Preoperative Evaluation	694
Risk Stratification	694
Perioperative Monitoring	695
Ischemic Heart Disease	695
Valvular Heart Disease	697
Tumors of the Heart	699
Congenital Heart Disease	700
Hypertension	700
Conclusion	701
References	701

43. Intraoperative Cardiopulmonary Resuscitation R. GORJI AND M. SIDANI

Introduction	703
Incidence, Morbidity, and Mortality	703
Survival From Intraoperative Cardiac Arrest	704
Predictors	704
Cause of Intraoperative Cardiac Arrest	705
Cardiopulmonary Resuscitation Quality	706
Cardiac Arrest and Cardiopulmonary Resuscitation in	
Neurosurgical Patients	706
Prognosis	709
Conclusion	709
References	710

44. Coexisting Diabetes Mellitus in Neurosurgical Patients

N.B. PANDA, S. SAHU AND A. SWAIN

Introduction	714
Incidence of Diabetes Mellitus	714
Glycemic Indices	714

References

CON	TENTS	xiii
678	Modes of Glucose Measurement	714
678	Pathophysiology of Diabetes Mellitus	715
679	Cerebral Glucose Metabolism	715
679	Hyperglycemia and the Brain	715
	Hyperglycemic Neuropathy	716
	Diabetic Dysautonomia	716
	Hypoglycemia and the Brain	716
	Evidence of Glycemic Control in Important	
681	Neurosurgical Subsets	717
681	Traumatic Brain Injury	717
681	Subarachnoid Hemorrhage	717
683	Cerebrovascular Accidents	717
684	Tumor Surgery	718
685	Spine Surgery	718
687	Blood Sugar Management in Perioperative	
688	Period and Neurocritical Care	718
689	Intraoperative Management	719
690	Anesthetic Management	719
690	Postoperative Glycemic Management	719
690	Blood Sugar Control in Emergency	
	Neurosurgical Patient	720
	Blood Sugar Control in Intensive Care Setup	720
	Nutrition	720
	Conclusions	720
	Coexisting Hypertension in Neurosurgical Patients	721
693	Introduction	721
694	Physiology of Cerebral Circulation	721
694	Pathophysiology of Arterial Hypertension	722
695	Hypertension in Patients With Traumatic	
695	Brain Injury	723
697	Perioperative Management	724
699	Preoperative Evaluation	724
700	Antihypertensive Drugs	725
700	Intraoperative Management	725
701	Monitoring	725
701	Induction of Anesthesia	725
	Maintenance of Anesthesia	726
	Recovery From Anesthesia	726
	Postoperative Care	726
	Neurocritical Care	727
703	Conclusion	727
703	References	727
704		
704	45. Neuromuscular Disorders	
705	P.U. BIDKAR AND M.V.S. SATYA PRAKASH	
706	· · ·	50.4
	Introduction	734
706	Myasthenia Gravis	735
709	Myasthenic Crisis	743
709	Lambert–Eaton Myasthenic Syndrome	747
710	Guillain–Barré Syndrome	748
	Periodic Paralysis	753
	Myotonias Muscular Dystrophies	755 758
	Muscular Dystrophies Motor Neuron Diseases	759
	Motor Neuron Diseases Multiple Sclerosis	759
	Parkinson's Disease	760 761
714	Alzheimer's Disease	763
714	Huntington's Disease	763
	- I GILLING LOUGO	(V T

46. Neuromuscular Electrical Stimulation in Critically Ill Patients	
N. LATRONICO, N. FAGONI AND M. GOBBO	
Introduction	771
Neuromuscular Electrical Stimulation: Basic	552
Concepts and Practical Considerations Neuromuscular Electrical Stimulation in the	772
Intensive Care Unit	775
Contraindications and Adverse Effects	776
Recommendations for the Use of Neuromuscular	
Electrical Stimulation in the Intensive Care Unit	777
References	780

47. Neurological Patients for Nonneurosurgeries

K. JANGRA, V.K. GROVER AND H. BHAGAT

Neurodegenerative Diseases	784
Demyelinating Disease	788
Neuromuscular Disease: Myasthenia Gravis	791
Epilepsy	793
Intracranial Tumors	794
Traumatic Brain Injury	797
References	800

48 Anesthesia for Electroconvulsive Therapy U. GRUNDMANN

Background	805
Technique of Electroconvulsive Therapy	805
Contraindications	806
Preprocedure Management	806
Anesthesia for Electroconvulsive Therapy	806
Side Effects	809
Special Conditions	809
Conclusion	810
References	810

XII

FLUIDS AND ELECTROLYTE MANAGEMENT

49. Fluids and Electrolyte Management

J.N. MONTEIRO

Conclusion Clinical Pearls References	824 825 825
50. Crystalloid and Colloid Fluids R.G. HAHN	
Crystalloid Fluids Colloid Fluids Which Fluid to Choose? Conclusions	827 829 830 831
References	832

XIII

PAIN MANAGEMENT

51. Pain Management Z. ALI, S. SINGH, N. HASSAN AND I. NAQASH Postcraniotomy Pain 836 Introduction 836 Incidence 836 Anatomical and Physiological Basis of Pain Following Craniotomy 836 Pain-Sensitive Structures of Cranium 838 838 Pathogenesis of Postcraniotomy Pain Factors Affecting Postcraniotomy Pain 838 Classification and Assessment of)5 839 Postcraniotomy Pain)6 Preemption of Pain 840 6 Treatment of Acute Pain 840 6 Postcraniotomy Pain Management in the)9 Pediatric Population 843)9 Conclusion 843 0 Acute Pain Management After Spinal Surgery 843 0 Pathophysiology 844 Treatment Modalities for Acute Postoperative Spinal Pain 844 Conclusion 848 References 849

XIV

BRAIN DEATH AND ETHICAL ISSUES

- 52. Brain Death and Ethical Issues in Neuroanesthesia Practice
- M. RADHAKRISHNAN AND S. LALWANI

815 815

817

817		
818	Part A: Brain Death	856
818	Introduction	856
820	Criteria for Diagnosing Death	856
820	Need for Brain Death Diagnosis	856
821	Rules Regulating Diagnosis of Brain Death	856
822	Criteria for Certifying Brain Stem Death	857
823	Pitfalls/Controversies	859

xiv

Conclusion	861	В
Appendix I	861	N
Part B: Ethical Issues in Neuroanesthesia Practice	863	R
Introduction	863	
Ethical Issues in Clinical Care	863	5
Ethical Issues Related to Research	867	S.
Ethical Issues Related to Team Work	868	0.
Ethical Issues Related to Training	868	Н
Ethical Issues Related to Innovative Neurosurgery	869	S
Conclusion	869	Н
References	869	Т
		S
53. Organ Donation		Ν
M.J. SOUTER		S
		Ν
Introduction	871	Е
Conclusion	876	R

XV

EVIDENCE-BASED PRACTICE

54. Evidence-Based Practice of Neuroanesthesia I. KAPOOR AND H. PRABHAKAR

Introduction
Evidence-Based Practice and Neuroanesthesia
Evidence and the Brain Trauma Foundation Guidelines
Unresolved Issues in the Practice of Neuroanesthesia
Conclusion
Clinical Pearls
References

55. Translational Research

M. IDA AND M. KAWAGUCHI

References

XVI RECENT ADVANCES

56. Recent Advances in Neuroanesthesiology T.L. WELCH AND J.J. PASTERNAK

Introduction	897
Endovascular Treatment of Stroke and Perioperative Stroke	897
Indications for Deep Brain Stimulation	898
Anesthetic Neurotoxicity	899
Pre- and Postconditioning	900

861	Brain Monitoring	901
861	New Assays for Creutzfeldt–Jakob Disease	902
863	References	903
863		
863	57. Stem Cell Therapy	
867 868	S. SHARMA AND R. AGGARWAL	
868	Hypothesis of Stem Cell Research	907
869	Stem Cell	907
869	Historical Background	908
869	Types of Stem Cells	908
	Sources of Stem Cells	908
	Mesenchymal Stem Cells	909
	Stem Cells in Neurological Diseases	909
	Mode of Action of Stem Cell Therapy	910
871	Ethical Issues	910
876	Recent Advances	911
876	References	911
	58. Pharmacogenomics	
	Y.N. MARTIN AND W.T. NICHOLSON	
	Introduction	913
	Basic Genetic Principles	914
	Basic Pharmacologic Principles	914
	Anesthesia Contribution to the History	
	of Pharmacogenomics	915
881	Pharmacogenomics: Current Application	
883	to Clinical Anesthesia	916
887	Conclusion	921

xv

922

XVII

STERILIZATION TECHNIQUES

59. Sterilization and Disinfection

S. MOHAPATRA

References

887 887 889

889

CONTENTS

Background	930
Recommendation of Preferred Methods for	
Various Medical Devices	931
Recommendation for the Cleaning and	
Decontamination of Environmental Surfaces	931
Recommendation for Blood Spill on the Surface	932
Cleaning and Disinfection of Medical Instruments	933
Cleaning and Reprocessing of Patient	
Care Equipment	933
Reprocessing of Respiratory Apparatus and	
Endoscopes	935
Reprocessing of Endoscopes	936
Specific Issues	938
Special Precaution for Inactivation of	
Creutzfeldt–Jakob Disease	939
Health Care–Associated Infections	940
Infections in Operating Rooms and Intensive	
Care Units	940
Conclusion	943
References	943

60. Universal Precautions in the Intensive	
Care Unit	
A.YU LUBNIN AND K.A. POPUGAEV	
Introduction	94
Prophylactics of Health Care–Associated Infections	
in the Intensive Care Unit	94
Early Diagnosis of Pathogens and Infection	
Complications in the Intensive Care Unit	94
Rational Antibiotic Therapy	94
Systemic Approach	94
Conclusion	94
References	94

XVIII PALLIATIVE CARE

61. Palliative Care to Neurological and

Neurosurgical Patients

S. BHATNAGAR AND S.J. BHARTI

Introdu	ction						9
References					90		

62. Quality of Life and Health-Related Issues

L. VENKATRAGHAVAN AND S. BHARADWAJ

Introduction	963
Quality of Life and Health-Related Quality of Life	963
Utility of Health-Related Quality of Life	964
Tools for Measuring Health-Related Quality of Life	964
Uses of Measuring Health-Related Quality of Life	965
Health-Related Quality of Life in Relation to	
Neurosurgical/Neurological Conditions	965
Conclusion	970
References	970

XIX

BIOSTATISTICS

63. Biostatistics

M. KALAIVANI, S. AMUDHAN, A.D. UPADHYAY AND V.K. KAMAL

Introduction to Biostatistics	976
Definition of Statistics	976
Biostatistics and Its Applications	976

	Uses of Statistical Methods in Medical Sciences	976
	Some Basic Statistical Concepts	976
	Population and Sample	977
	Scale of Measurements	977
945	Constant	977
ντυ	Variables	977
946	Parameter and Statistic	978
940	Ratio, Proportion, and Rate	978
947	Statistical Inference	979
947 947	Estimation	979
948	Hypothesis Testing	979
940 948	Steps in Hypothesis Testing or Testing the	
940 948	Statistical Significance	979
940	Defining the Null and Alternative Hypotheses	980
	Calculating the Test Statistic	980
	Obtaining, Using, and Interpreting the <i>p</i> -Value	980
	Errors in Hypothesis Testing	980
	The Possible Mistakes We Can Make	980
	Other Important Concepts That Are Essential	
	in Statistical Inference	981
	Parametric and Nonparametric Statistical Methods	981
	Basic Principles of Statistics	981
	Probability Distributions	982
	Study Design	982
953	Sample Size	985
961	Data Collection and Preparing Data for Analysis	987
	Analysis and Presentation of Data	989
	Summarizing Data	989
	Comparing Groups: Continuous Data	989
	Comparing Groups: Categorical Data	991
963	Comparing Groups: Time to Event Data	991
963	Relation Between Two Continuous Variables	992
964	Multivariable Analysis	994
964	Conclusion	995
965	References	995

Index

997

xvi

List of Contributors

- M. Abraham Max Hospital Panchsheel, New Delhi, India
- **R. Aggarwal** All India Institute of Medical Sciences, New Delhi, India
- Z. Ali SKIMS, Srinagar, India
- S. Amudhan NIMHANS, Bengaluru, India
- M.-A. Babi Duke University, Durham, NC, United States
- **S. Bansal** National Institute of Mental Health and NeuroSciences (NIMHANS), Bangalore, India
- **S.D. Bergese** Ohio State University, Columbus, OH, United States
- H. Bhagat Postgraduate Institute of Medical Education and Research, Chandigarh, India
- S. Bharadwaj NIMHANS, Bangalore, India
- S.J. Bharti AIIMS, New Delhi, India
- S. Bhatnagar AIIMS, New Delhi, India
- P.U. Bidkar JIPMER, Puducherry, India
- F. Bilotta Sapienza University of Rome, Rome, Italy
- P.K. Bithal AIIMS, New Delhi, India
- V. Bonhomme CHR Citadelle, Liege, Belgium
- **A. Borozdina** I.M. Sechenov First Moscow Medical University, Moscow, Russia
- A. Defresne CHR Citadelle, Liege, Belgium
- **S.K. Dube** All India Institute of Medical Sciences, New Delhi, India
- M. Echeverría Centro Médico Docente Paraíso, Maracaibo, Venezuela
- **H. El Beheiry** University of Toronto, Toronto, ON, Canada; Trillium Health Partners, Toronto, ON, Canada
- S. Erb University Hospital Basel, Basel, Switzerland
- N. Fàbregas Hospital Clinic Universitari, Barcelona, Spain
- N. Fagoni University of Brescia, Brescia, Italy
- E. Farag Cleveland Clinic Foundation, Cleveland, OH, United States
- J. Fiorda-Diaz Ohio State University, Columbus, OH, United States
- P. Ganjoo GB Pant Hospital, New Delhi, India
- M. Gobbo University of Brescia, Brescia, Italy
- **R. Gorji** Upstate Medical University, Syracuse, NY, United States
- V.K. Grover Postgraduate Institute of Medical Education and Research, Chandigarh, India
- U. Grundmann Saarland University Medical Center, Homburg/Saar, Germany

- **D. Gupta** Sanjay Gandhi Post Graduate Institute of Medical Sciences, Lucknow, India
- N. Gupta Indraprastha Apollo Hospital, New Delhi, India
- **R.G. Hahn** Södertälje Hospital, Södertälje, Sweden
- N. Hassan Government Gousia Hospital, Srinagar, India
- M. Ida Nara Medical University, Kashihara, Japan
- M.L. James Duke University, Durham, NC, United States
- **K. Jangra** Postgraduate Institute of Medical Education and Research, Chandigarh, India
- M. Kalaivani AIIMS, New Delhi, India
- V.K. Kamal AIIMS, New Delhi, India
- A. Kannaujia Sanjay Gandhi Post Graduate Institute of Medical Sciences, Lucknow, India
- I. Kapoor All India Institute of Medical Sciences, New Delhi, India
- M. Kawaguchi Nara Medical University, Kashihara, Japan
- A.K. Khanna Cleveland Clinic Foundation, Cleveland, OH, United States
- S.A. Khan Duke-NUS Medical School, Singapore, Singapore
- **K.M. Kla** Vanderbilt University Medical Center, Nashville, TN, United States
- V. Krishnamoorthy University of Washington, Seattle, WA, United States
- **D.K. Kulkarni** Nizam's Institute of Medical Sciences, Hyderabad, India
- S. Lalwani All India Institute of Medical Sciences, New Delhi, India
- N. Latronico University of Brescia, Brescia, Italy
- L.A. Lee Kadlec Regional Medical Center, Richland, WA, United States
- A. Lele University of Washington, Seattle, WA, United States
- **A.Yu Lubnin** Neurocritical Care of Burdenko Research Neurosurgical Institute, Ministry of Health, Moscow, Russia
- A. Luthra PGIMER, Chandigarh, India
- C. Mahajan AIIMS, New Delhi, India
- **S. Mahajan** Postgraduate Institute of Medical Education and Research, Chandigarh, India
- **P.H. Manninen** Toronto Western Hospital, Toronto, ON, Canada
- M. Marda Max Hospital Panchsheel, New Delhi, India
- R. Mariappan Christian Medical College, Vellore, India

- A. Marson University of Liverpool, Liverpool, United Kingdom
- Y.N. Martin Mayo Clinic, Rochester, MN, United States
- R. Mitra Care Hospital, Bhubhaneswar, India
- S. Mohapatra AIIMS, New Delhi, India
- **S. Moningi** Nizam's Institute of Medical Sciences, Hyderabad, India
- J.N. Monteiro P.D. Hinduja Hospital and Medical Research Centre, Mumbai, India
- I. Naqash SKIMS, Srinagar, India
- W.T. Nicholson Mayo Clinic, Rochester, MN, United States
- C. Oetliker University Hospital Basel, Basel, Switzerland
- **D. Padmaja** Nizam's Institute of Medical Sciences, Hyderabad, India
- **N.B. Panda** Post Graduate Institute of Medical Education and Research, Chandigarh, India
- M. Panebianco University of Liverpool, Liverpool, United Kingdom
- J.J. Pasternak Mayo Clinic College of Medicine, Rochester, MN, United States
- **K.A. Popugaev** Federal Medical-Biological Agency, Ministry of Health, Moscow, Russia
- L. Porcella Spedali Civili University Hospital, Brescia, Italy
- **H. Prabhakar** All India Institute of Medical Sciences, New Delhi, India
- F. Rabai University of Florida, Gainesville, FL, United States
- **M. Radhakrishnan** National Institute of Mental Health and NeuroSciences, Bengaluru, India
- S. Rajan Cleveland Clinic, Cleveland, OH, United States
- **R. Ramani** University of Florida, Gainesville, FL, United States
- **V.J. Ramesh** National Institute of Mental Health and NeuroSciences, Bengaluru, India
- **S. Rao** Yale New Haven Hospital, New Haven, CT, United States
- G.P. Rath All India Institute of Medical Sciences (AIIMS), New Delhi, India
- S. Sahu Tata Main Hospital, Jamshedpur, India
- D. Saigal University of Delhi, New Delhi, India
- L. Salvador Consorcio Hospital General Universitario de Valencia, Valencia, Spain

- K. Sandhu Max Superspeciality Hospital, New Delhi, India
- M.V.S. Satya Prakash JIPMER, Puducherry, India
- **M. Sethuraman** Sree Chitra Tirunal Institute for Medical Sciences and Technology, Trivandrum, India
- **S. Sharma** All India Institute of Medical Sciences, New Delhi, India
- E.E. Sharpe Mayo Clinic College of Medicine, Rochester, MN, United States
- **M. Sidani** Upstate Medical University, Syracuse, NY, United States
- V. Singhal Medanta (The Medicity), Gurgaon, India
- G. Singh Christian Medical College, Vellore, India
- G.P. Singh AIIMS, New Delhi, India
- S. Singh SKIMS, Srinagar, India
- **M.J. Souter** University of Washington, Seattle, WA, United States
- K. Sriganesh NIMHANS, Bangalore, India
- S. Srivastava Sanjay Gandhi Post Graduate Institute of Medical Sciences, Lucknow, India
- L.A. Steiner University Hospital Basel, Basel, Switzerland
- N. Stoicea Ohio State University, Columbus, OH, United States
- A. Swain Tata Main Hospital, Jamshedpur, India
- M.S. Tandon University of Delhi, New Delhi, India
- **S.S. Thota** Upstate Medical University, State University of New York, Syracuse, NY, United States
- D.E. Traul Cleveland Clinic, Cleveland, OH, United States
- **S. Tripathy** All India Institute of Medical Sciences Bhubaneswar, Bhubaneswar, India
- **G.S. Umamaheswara Rao** National Institute of Mental Health and NeuroSciences (NIMHANS), Bangalore, India
- A.D. Upadhyay AIIMS, New Delhi, India
- L. Venkatraghavan University of Toronto, Toronto, ON, Canada
- **B. Vinay** Gulf Medical University, Ajman, United Arab Emirates
- T.L. Welch Mayo Clinic College of Medicine, Rochester, MN, United States
- T.Y. Yeoh Toronto Western Hospital, Toronto, ON, Canada
- J. Žurek University Hospital Brno, Brno, Czech Republic

xviii

Foreword

There has been substantial flux in the field of neuroanesthesia over the past two decades. This followed what could be viewed as a relatively quiescent and narrowly focused period in neuroanesthesia. During the latter period much of the focus was on the roles of hypotension in aneurysm surgery, hyperventilation for head injury, anesthetics as cerebral protectants, and endless debates about intravenous versus inhaled anesthetics. More recently the purview of neuroanesthesia broadened substantially partly reflecting the huge expansion in the way patients with neurological diseases are managed. Patients are cared for not only in the traditional operating theater and intensive care unit but also in more complex ways inside and outside the operating theater. Examples include endovascular treatment of aneurysms, magnetic resonance imaging (MRI)- and computed tomography (CT)-guided surgery, minimally invasive approaches such as deep brain stimulation (DBS), the growth in neurological monitoring from the awake patient to complex electrophysiology, and the ever increasingly aggressive spine reconstructions. The neuroanesthesiologist of today is not only a traveler going to different parts of the hospital but needs to be an expert in patient management in all the newer scenarios. Furthermore, this expansion of the repertoire requires greater refinement in our intimate knowledge of how drugs and techniques may enhance or adversely affect the nuanced neurosurgical outcomes.

Given the above changes in practice, the novice and experienced neuroanesthesia practitioners now, more than ever, need an authoritative text not just full of "book knowledge" but written by those who on a daily basis meld the academic with the practical. To his credit, Hemanshu Prabhakar has brought together an accomplished group of international experts to contribute to this excellent volume. Their writing is authoritative and up to date while being practical and easy to understand. There is no doubt that this book is a very useful contribution to the modern practice of neuroanesthesia.

Adrian W. Gelb

Distinguished Professor Department of Anesthesia and Perioperative Care University of California San Francisco

Preface

Neuroanesthesia is growing fast as a superspecialty as more and more research is being conducted to improve the practice. The focus is now not restricted to the *bench* but has also extended to the *bedside*. There is a need to have a volume that provides a comprehensive view of various topics and issues related to neuroanesthesia. This book provides easy understanding of anesthesia related to neurological sciences. This book will be useful for any medical practitioner associated with neurosurgical and allied branches such as neurology and neuroradiology. This book also caters to the needs of all those anesthetists who practice neuroanesthesia but do not have a formal training in it. It will provide a quick and easy access to understand neuroanesthesia. This book will provide an insight into all possible aspects of anesthetic management of neurosurgical and neurologic patients. This book has been written mainly for the residents and students appearing for examination and anesthetists practicing neuroanesthesia. This book includes the basic sciences such as anatomy, physiology, and pharmacology related to brain and spinal cord. This book also provides an understanding of related issues such as palliative care, evidence-based practice of neuroanesthesia, sterilization techniques, and ethical issues.

This book covers all topics related to neuroanesthesia and provides complete knowledge about brain and spinal cord. The book includes chapters related to allied specialties such as critical care, neurology, and neuroradiology. This book also contains a section on biostatistics, which would be extremely useful to residents and trainees who have to submit dissertation or thesis during their course.

This book contains pieces of information that have been brought together, which may have otherwise been available in different books.

I am grateful to all my authors across the globe, from as many as 14 different countries. The knowledge and information shared by the authors through different chapters is the representation of the global practice of neuroanesthesia and not limited to geographical boundaries. I sincerely hope this endeavor will improve our knowledge in the management of neurologically compromised patients and bring about an improved patient care.

Hemanshu Prabhakar

Acknowledgments

I wish to acknowledge the support of the administration of the All India Institute of Medical Sciences (AIIMS), New Delhi, in allowing me to conduct this academic task.

Words are not enough to express my gratitude for the constant support and encouragement from Prof. P.K. Bithal (Former Head of Neuroanesthesiology and Critical Care, AIIMS, New Delhi). I thank the faculty and staff of the department of Neuroanesthesiology and Critical Care, for their support.

Special thanks are due to the production team at Elsevier.