

LECTURES AND ABSTRACTS

ANAESTHESIA FOR LOWER LIMB REVASCULARISATION

Dr Anuja Abayadeera

Lower limb revascularisation is done for critical limb ischaemia due to proven arterial occlusive disease and for acute limb ischaemia which occurs due to thromboembolism, trauma, and percutaneous vascular interventions.

Lower limb revascularisation surgery is classified as high risk under American College of Cardiology and American Heart Association guidelines on pre operative assessment. Therefore pre operative cardiac risk assessment and institution of appropriate risk reducing measures are important.

Aims of anaesthesia are to maintain haemodynamic stability, normothermia, meticulous perioperative fluid management and postoperative pain control. The anaesthetic technique per se has no bearing on the outcome as the quality of the anaesthetic.

Acute limb ischaemia is an emergency to prevent limb loss. Patients are often ill; and though the same cardiac considerations apply extensive pre operative evaluation is not possible due to time constraints. Embolectomy would be performed under local anaesthesia with the anaesthetist monitoring the patient. When more invasive surgery is planned general anaesthesia is preferred as patients would be receiving therapeutic doses of anticoagulants.

In both situations monitoring and management for reperfusion injuries is required.
