New joint statement on propofol

In response to requests, the American Association of Nurses Anesthetists (AANA) and the American Society of Anesthesiologists (ASA) issued a brief joint statement in April about propofol administration. They said they issued the statement because of “patient safety issues” related to use of propofol sedation by “un-qualified individuals.”

Controversy in endoscopy

Propofol has raised controversy, particularly in GI endoscopy, because some endoscopists are using it as an alternative to the traditional drug regimens. In some cases, propofol is being given by RNs who do not have anesthesia training. Advocates say studies show this approach can be safe and cost-effective.

AANA and ASA say agents such as propofol require special attention because sedation is a continuum, and it is not always possible to know how an individual patient will respond. There is potential for “rapid, profound changes in the depth of sedation/analgesia” as well as a lack of antagonists.

The statement advises that propofol sedation be given only by persons trained in general anesthesia who are not also involved in the surgical or diagnostic procedure. Noting that this position is in accord with the propofol package insert, the statement says “failure to follow these recommendations could put patients at increased risk of significant injury or death.” Other agents are of similar concern, such as thiopental, methohexital, or etomidate.

The statement is not intended to apply when propofol is given to intubated, ventilated patients in critical care settings.

Studies on propofol

On the other side are 2 reports from researchers in Switzerland that show propofol can be given safely by nonanesthetists who are familiar with the drug’s use and pharmacological properties and who conduct careful monitoring. A review article by Chen and Rex cites “multiple studies” documenting safe administration of propofol by nonanesthetists but notes the practice is controversial and in need of further study.

Examining how use of propofol affects efficiency, Wurz and Bernstein analyzed 1,056 charts to evaluate differences between drug regimens. They found time savings of 5.3 minutes per case, which they decided was not enough to warrant changing their use of traditional medications.

The AANA/ASA statement is at www.asahq.org. Look under News.

References


Copyright © 2004. OR Manager, Inc. All rights reserved. 800/442-9918. www.ormanager.com