THIS MONTH IN

ANESTHESIOLOGY



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Acquired Liver Injury in the 898 Intensive Care Unit (Clinical Concepts and Commentary)

Causes and mechanisms of acquired liver injury in the intensive care unit and clinical implications are discussed.

Deficits in Retention for 772 Verbally Presented Medical Information

Healthy subjects remember only about 20% of verbally presented medical information.

Intralipid, a Clinically Safe 836 Compound, Protects the Heart against Ischemia Reperfusion Injury More Efficiently than Cyclosporine-A

Mechanistic studies examining intralipid's cardioprotection are performed.

Effect of Subanesthetic 868 Ketamine on Intrinsic Functional Brain Connectivity: A Placebo-controlled Functional Magnetic Resonance Imaging Study in Healthy Male Volunteers

Ketamine induced connectivity changes in brain areas involved in motor function, psychedelic effects, and pain processing.

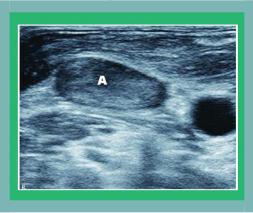
Unanticipated Difficult Airway 883 in Obstetric Patients: Development of a New Algorithm for Formative Assessment in High-fidelity Simulation (Original Investigations in Education)

Feasibility of this algorithm is made using high-fidelity simulation. *See the accompanying Editorial View on* **page 701**

Deep Impact of Ultrasound in the Intensive Care Unit: The "ICU-sound" Protocol

Ultrasonography may provide rapid diagnosis essential for patients admitted to an intensive care unit (ICU). In this prospective study 125 consecutive patients admitted to the ICU were

assessed under a critical care ultrasonography protocol to determine the feasibility and utility of ultrasound examination to improve diagnosis and treatment. The admitting diagnosis was modified in 25.6% of patients and confirmed in 58.4%. Further, ultrasonographic findings led to further testing, changes in medical therapy, or invasive procedures in 17% to 21% of patients. Overall, this study shows the potential for ultrasonography as part of a global assess-



ment of patients at admission to the ICU. See the accompanying Editorial View on page 696

Prevention of Intraoperative Awareness with Explicit Recall in an Unselected Surgical Population: A Randomized Comparative Effectiveness Trial

The Bispectral Index[®] (BIS) monitor (Covidien, Boulder, CO) was developed to provide a measure of a patient's level of consciousness. A large, prospective, randomized controlled trial of unselected surgical patients compared the incidence of definite intraoperative awareness in patients monitored with BIS or end-tidal volatile anesthetic concentrations. No significant differences were found in the incidence of definite awareness between the two groups and the study was terminated early due to futility. This study did not show superiority of protocols using BIS *versus* anesthetic concentration to prevent definite intraoperative awareness. *See the accompanying Editorial View on* **page 693**

Perioperative Smoking Cessation Intervention with Varenicline: A Double-blind, Randomized, Placebo-controlled Trial

The association between smoking and increased risk of perioperative death and serious postoperative complications is well established. This prospective, multicenter, double-blind, randomized, placebo-controlled trial examined the efficacy and safety of perioperative smoking cessation using varenicline *versus* placebo in patients undergoing elective surgeries. Patients in the varenicline group showed a significant difference in 7-day point prevalence (those that had not smoked the previous 7 days) at 3, 6, and 12 months (P = 0.04) compared with patients in the placebo group. Patients in the varenicline group experienced nausea significantly more frequently compared with placebo controls. This study demonstrates the potential for increased abstinence in surgical patients treated with varenicline.

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