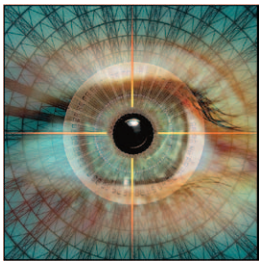
ANESTHESIOLOGY



ON THE COVER:

The best proven approach to predicting response to surgical stimulation under general anesthesia is use of pharmacokinetic–pharmacodynamic (PK/PD) models for opioids and hypnotics. An alternative approach is based on the individual assessment of a physiologic reflex evoked by a standardized noxious test. In this issue of ANESTHESIOLOGY, Guglielminotti *et al.* demonstrate that the pupillary dilatation reflex amplitude is as accurate as use of PK/PD models for predicting movement in response to surgical stimulation. In an accompanying Editorial View, Larson and Gupta tell us how pupillometry may bring us a step closer to tailoring anesthesia in real-time to meet the needs of each individual patient.

- Guglielminotti *et al.*: Prediction of Movement to Surgical Stimulation by the Pupillary Dilatation Reflex Amplitude Evoked by a Standardized Noxious Test, p. 985
- Larson and Gupta: Pupillary Reflex Dilation to Predict Movement: A Step Forward Toward Real-time Individualized Intravenous Anesthetics, p. 961

◇ Refers to This Month in Anesthesiology
◆ Refers to Editorial Views
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