ANESTHESIOLOGY

Volume 135 Issue 1 July 2021

>	This Month in AnesthesiologyA1
	Science, Medicine, and the AnesthesiologistA13
	Infographics in AnesthesiologyA17
•	Editorials
	Authorship and Publication Matters: Credit and Credibility E. D. Kharasch, M. J. Avram, B. T. Bateman, J. D. Clark, D. J. Culley, A. J. Davidson, T. T. Houle, Y. Jiang, J. H. Levy, M. J. London, J. W. Sleigh, L. Vutskits
	Clinical Practice Guidelines in Anesthesiology: Adjusting Our Expectations M. D. Neuman, J. L. Apfelbaum
	Tranexamic Acid in High-risk Arthroplasty Patients: How Will We Adapt to Evolving Evidence? D. A. Colquhoun, B. R. Hallstrom, S. Kheterpal
	Targeting the Hypoxia-Adenosine Link for Controlling Excessive Inflammation A. Czopik, X. Yuan, S. E. Evans, H. K. Eltzschig15

Special Article

Anesthesiology: Resetting Our Sights on Long-term Outcomes: The 2020 John W. Severinghaus Lecture on Translational Science

Many patients experience new cognitive deficits after anesthesia and surgery. The author's research team has discovered that anesthetic drugs trigger persistent overactivity of memory-blocking receptors, and they have identified new strategies to preserve memory by selectively inhibiting these receptors.

Perioperative Medicine

CLINICAL SCIENCE

Levels of Evidence Supporting the North American and European
 Perioperative Care Guidelines for Anesthesiologists between 2010
 and 2020: A Systematic Review

A. Laserna, D. A. Rubinger, J. E. Barahona-Correa,
N. Wright, M. R. Williams, J. A. Wyrobek, L. Hasman,
S. J. Lustik, M. P. Eaton, L. G. Glance31

In a systematic review of 2,280 recommendations in 60 guidelines published by major North American and European societies, half of the recommendations were supported by a low level of evidence. The proportion of recommendations supported by a high level of evidence did not increase between 2010 and 2020.

Safety of Tranexamic Acid in Hip and Knee Arthroplasty in High-riskPatients

J. Poeran, J. J. Chan, N. Zubizarreta, M. Mazumdar, L. M. Galatz, C. S. Moucha......57

National administrative data from more than 500 hospitals and 40,000 patients demonstrate that approximately half of high-risk patients receive tranexamic acid, similar to non—high-risk patients. Tranexamic acid use in high-risk patients undergoing lower-extremity arthroplasty is associated with fewer transfusions. Tranexamic acid use is not associated with venous thromboembolism, myocardial infarction, seizures, ischemic strokes, or transient ischemic attacks. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT

◇ Refers to This Month in ANESTHESIOLOGY
 ◆ Refers to Editorial
 ♠ This article has an Audio Podcast







ON THE COVER: Although there are thousands of published recommendations in anesthesiology clinical practice guidelines, the extent to which these are supported by high levels of evidence is not known. In this issue of ANESTHESIOLOGY, Laserna *et al.* present a systematic review of anesthesia evidence-based recommendations from the major North American and European anesthesiology societies, mapping the level of evidence supporting current recommendations. In an accompanying editorial, Neuman and Apfelbaum discuss the strengths and limitations of practice guidelines and their role in current clinical practice. Cover Illustration: A. Johnson, Vivo Visuals. Photo: J. P. Rathmell.

- Laserna et al.: Levels of Evidence Supporting the North American and European Perioperative Care Guidelines for Anesthesiologists between 2010 and 2020: A Systematic Review, p. 31
- Neuman and Apfelbaum: Clinical Practice Guidelines in Anesthesiology: Adjusting Our Expectations, p. 9

₩ ♦	Midazolam and Ketamine Produce Distinct Neural Changes in
(D)	Memory, Pain, and Fear Networks during Pain
Trans	K. M. Vogt, J. W. Ibinson, C. T. Smith, A. T. Citro, C. M. Norton,

In this randomized within-subject crossover study of healthy volunteers using an experimental memory paradigm using periodic pain under light sedation, recollection memory was reduced by midazolam compared with saline and ketamine. The paradigm-related brain activity differed between the two drugs: Whereas midazolam mostly increased, ketamine predominantly decreased functional connectivity from brain regions involved in memory encoding, pain processing, and threat response. These observations highlight how pharmacologically distinct general anesthetics may engage distinct neural dynamics to modulate cognitive experience under threat of pain. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT

Automated Nerve Monitoring in Shoulder Arthroplasty: A Prospective Randomized Controlled Study

J. Chui, M. B. Y. Chohan, J. M. Murkin, M. Rachinsky, S. Dhir, G. S. Athwal, K. J. Faber, D. Drosdowech......83

Using a prospective study design, automated nerve monitoring with feedback *versus* blinded monitoring during shoulder arthroplasty was not associated with a reduced duration of nerve alerts. Secondary outcomes such as neurologic deficits and quality of life indices did not differ between the groups, although these outcomes improved in both groups over the course of the study. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*

Percutaneous Peripheral Nerve Stimulation (Neuromodulation) for Postoperative Pain: A Randomized, Sham-controlled Pilot Study

The use of active *versus* sham percutaneous peripheral nerve stimulation was associated with a reduction in pain scores and opioid consumption in the first 7 days after upper and lower extremity surgery. Peripheral nerve stimulation may also reduce pain's interference with physical and emotional functioning with few side effects. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*

Patient Involvement in Anesthesia Decision-making: A Qualitative Study of Knee Arthroplasty

V. Graff, J. T. Clapp, S. J. Heins, J. J. Chung, M. Muralidharan, L. A. Fleisher, N. M. Elkassabany......111

In a qualitative study of 36 anesthesia consultations before knee arthroplasty, it was found that the anesthesia consultation is complex with multiple functions and involvement in shared decision-making may not be the most important function of the visit. Shared decision-making may be limited by external factors and the risk of increasing preoperative anxiety. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT.

BASIC SCIENCE

In mice, isoflurane at 0.5% impaired hippocampus-dependent memory processing and ripple oscillations without inducing loss of righting reflex. At the cellular level, these effects were associated with decreased fast-spiking interneuron activity and a concomitantly enhanced activity of excitatory neurons. These observations suggest that the suppression of hippocampal ripples by isoflurane *via* the differential modulation of principal neurons and interneurons contributes to the amnestic action of this drug. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT

Critical Care Medicine

BASIC SCIENCE

Sevoflurane Exerts Protective Effects in Murine Peritonitis-induced
 Sepsis via Hypoxia-inducible Factor 1α/Adenosine A2B Receptor Signaling

K.-C. Ngamsri, F. Fabian, A. Fuhr, J. Gamper-Tsigaras, A. Straub, D. Fecher, M. Steinke, H. Walles, J. Reutershan, F. M. Konrad........136

In two murine peritonitis-induced sepsis models, sevoflurane reduced peritoneal lavage neutrophil counts by lower adhesion molecule expression, reduced cytokines, and protein extravasation. The mechanism of these reported protective effects was due to the expression of hypoxia-inducible factor 1α and adenosine A2B receptor in the intestine, liver, and lung. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT

Education

IMAGES IN ANESTHESIOLOGY

51
52
54

CLINICAL FOCUS REVIEW

 On the Challenges of Anesthesia and Surgery during Interplanetary Spaceflight

M. Komorowski, S. Thierry, C. Stark, M. Sykes, J. Hinkelbein155

This focused review summarizes the medical, logistical, and environmental challenges that would be associated with dealing with a traumatic surgical case during an interplanetary space mission in the near future.

	REVIEW ARTICLE
	Obstetric Anesthesia and Heart Disease: Practical Clinical Considerations ML. Meng, K. W. Arendt
	The safe management of pregnancy in women with heart disease requires appropriate anesthetic, cardiac, and obstetric care. This clinical review discusses current trends in obstetric anesthesia management. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT
	MIND TO MIND
	As If M. DiMiceli-Zsigmond
	Objectifying N. J. Brown186
Co	rrespondence
	Anesthesiologist Age and Sex Influence Patients: Comment F. Wang, Y. Zhu, Y. Hu, Y. Wang, T. Zhu188
	Anesthesiologist Age and Sex Influence Patients: Reply K. T. Forkin, G. R. Lyons, J. Z. Ma, E. C. Nemergut
	Perioperative Temperature Monitoring: Comment T. Nelson

Perioperative Temperature Monitoring: Reply D. I. Sessler, R. J. Nault190		
General Anesthesia Type and Cancer Prognosis: Comment M. Iwasaki, D. Ma191		
Placental Veins Catheterization: A Realistic Simulation Model for Medical Students		
E. Guasch, N. Brogly, F. Gilsanz191		
Reviews of Educational Material193		
Erratum		
Anesthesiology Reflections from the Wood Library-Museum		
Foregger's Autogenor: Revitalized Air for Athletes and Anesthesia		
Jane S. Moon and Melissa L. Coleman110		
Hanaoka Style: A Blend of East and West That's Off the Hook Melissa L. Coleman and Jane S. Moon150		
George Harley's Triple Threat: The A.C.E. of Anesthetic Mixtures Jane S. Moon and Melissa L. Coleman		
Careers & EventsA19		

INSTRUCTIONS FOR AUTHORS

The most recently updated version of the Instructions for Authors is available at www. anesthesiology.org. Please refer to the Instructions for the preparation of any material for submission to ANESTHESIOLOGY.

Manuscripts submitted for consideration for publication must be submitted in electronic format *via* Editorial Manager (https://www.editorialmanager.com/aln). Detailed directions for submission and the most recent version of the Instructions for Authors can be found on the Journal's Web site (http://www.anesthesiologor.of). Books and educational materials for review should be sent to Alan Jay Schwartz, M.D., M.S.Ed., Director Education, Department of Anesthesiology and Critical Care Medicine, The Children's Hospital of Philadelphia,

34th Street and Civic Center Blvd., Room 9327, Philadelphia, Pennsylvania 19104-4399. Article-specific permission requests are managed with Copyright Clearance Center's Rightslink service. Information can be accessed directly from articles on the journal Web site. More information is available at http://anesthesiology.pubs.asahq.org/public/rightsandpermissions.aspx. For questions about the Rightslink service, e-mail customercare@copyright.com or call 877-622-5543 (U.S. only) or 978-777-9929. Advertising and related correspondence should be addressed to Advertising Manager, ANESTHESIOLOGY, Wolters Kluwer Health, Inc., Two Commerce Square, 2001 Market Street, Philadelphia, Pennsylvania 19103 (Web site: http://www.wkadcenter.com/). Publication of an advertisement in ANESTHESIOLOGY does not constitute endorsement by the Society or Wolters Kluwer Health, Inc. of the product or service described therein or of any representations made by the advertiser with respect to the product or service.

ANESTHESIOLOGY (ISSN 0003–3022) is published monthly by Wolters Kluwer Health, Inc., 1800 Dual Highway, Suite 201, Hagerstown, MD 21740-6636. Business office: Two Commerce Square, 2001 Market Street, Philadelphia, PA 19103. Periodicals postage paid at Hagerstown, MD, and at additional mailing offices. Copyright © 2021, the American Society of Anesthesiologists. All Rights Reserved.

Annual Subscription Rates: United States—\$1077 Individual, \$2671 Institution, \$434 In-training. Rest of World—\$1136 Individual, \$2965 Institution, \$434 In-training. Single copy rate \$266. Subscriptions outside of North America must add \$58 for airfreight delivery. Add state sales tax, where applicable. The GST tax of 7% must be added to all orders shipped to Canada (Wolters Kluwer Health, Inc.'s GST Identification #895524239, Publications Mail Agreement #1119672). Indicate in-training status and name of institution. Institution rates apply to libraries, hospitals, corporations, and partnerships of three or more individuals. Subscription prices outside the United States must be prepaid. Prices subject to change without notice. Subscriptions will begin with currently available issue unless otherwise requested. Visit us online at www.lww.com.

Individual and in-training subscription rates include print and access to the online version. Online-only subscriptions for individuals (\$356) and persons in training (\$356) are available to nonmembers and may be ordered by downloading a copy of the Online Subscription FAXback Form from the Web site, completing the information requested, and faxing the completed form to 301-223-2400. Institutional rates are for print only; online subscriptions are available via Ovid. Institutions can choose to purchase a print and online subscription together for a discounted rate. Institutions that wish to purchase a print subscription, please contact Wolters Kluwer Health,

Inc., 1800 Dual Highway, Suite 201, Hagerstown, MD 21740-6636; phone: 800-638-3030; fax: 301-223-2400. Institutions that wish to purchase an online subscription or online with print, please contact the Ovid Regional Sales Office near you or visit www.ovid.com/site/index.jsp and select Contact and Locations.

Address for non-member subscription information, orders, or change of address: Wolters Kluwer Health, Inc., 1800 Dual Highway, Suite 201, Hagerstown, MD 21740-6636; phone: 800-638-3030; fax: 301-223-2400.

Address for member subscription information, orders, or change of address: Members of the American Society of Anesthesiologists receive the print and online journal with their membership. To become a member or provide a change of address, please contact the American Society of Anesthesiologists, 1061 American Lane, Schaumburg, Illinois 60173-4973; phone: 847-825-5586; fax: 847-825-1692; e-mail: membership@ASAhq. org. For all other membership inquiries, contact Wolters Kluwer Health, Inc., Customer Service Department, P.O. Box 1610, Hagerstown, MD 21740; phone: 800-638-3030; fax: 301-223-2400.

Postmaster: Send address changes to ANESTHESIOLOGY, P.O. BOX 1610, Hagerstown, MD 21740.

Advertising: Please contact Hilary Druker, National Account Manager, Health Learning, Research & Practice, Medical Journals, Wolters Kluwer Health, Inc.; phone: 609-304-9187; e-mail: Hilary Druker@wolterskluwer.com. For classified advertising: Dave Wiegand, Recruitment Advertising Representative, Wolters Kluwer Health, Inc.; phone: 847-361-6128; e-mail: Dave Wiegand@wolterskluwer.com.