

anticipated⁶ changes in serum K⁺ in response to catecholamine release during anesthesia and surgery⁷ may be modified by β -2-adrenoceptor blockade.

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Intravenous Lidocaine for Control of Coughing during Standby Cataract Surgery

To the Editor:—An occasional patient undergoing cataract surgery under retrobulbar and periorbital block will suddenly begin to cough or feel the urge to cough while the operation is underway and the eye is open.

I have used a technique in five patients that has proved efficacious in eliminating the coughing. Intravenous lidocaine in bolus doses of 0.3 to 0.4 mg/kg (usually 20 mg) not only stopped the coughing but eliminated the urge to cough. Obviously, one must be careful not to overdose the patient with lidocaine. However, I have never required more than 1.5 mg/kg throughout any

single case. Patients tolerate lidocaine very well and are often amazed at the anesthesiologist's ability to take away their cough during what may be a stressful time not only for the patient, but for the entire operating room staff.

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