A-43 Room 224–226, 10/17/2000 10:30 AM - 12:00 PM (PD) Femoral Nerve Block Improves Analgesia after Outpatient Anterior Cruciate Ligament Repair Kathleen L. Larkin, MD; Michael F. Mulroy, MD, Anesthesiology, Virginia Mason Medical Center, Seattle, WA, United States. Femoral nerve block with bupivacaine is superior to oral analgesics alone for pain relief in the first 24 hrs following outpatient ACL repair.

A-44 Room 224–226, 10/17/2000 10:30 AM - 12:00 PM (PD) Assessment of Balance Function Using Computerized Force Platform Following Ambulatory Anesthesia Dajun Song, MD; Fang Xu, MD; Frances Chung, FRCPC; Jean Wong, FRCPC; Kathryn Jenkins, FRCA, Anestheisa, Toronto Western Hospital, Toronto, ON, Canada. Compared to propofol, desflurane was associated with less balance disturbance during patient early recovery (measured using Balance Master®).

A-45 Room 224–226, 10/17/2000 10:30 AM - 12:00 PM (PD) Influence of the Type of Anesthesia on the Patient's Length of Stay in the PACU of an Ambulatory Surgery Center Nitin Shah, M.D.; Sara L. Clack, R.A.; Terry Trautloff, R.N.; Eliza-Jasmine Tran, B.A.; Cynthia T. Anderson, M.D., Anesthisology, University of California, Irvine, CA, United States. Patients having MAC had a significanly shorter stay in the PACU in comparison to other types of anesthesia.

A-46 Room 224–226, 10/17/2000 10:30 AM - 12:00 PM (PD) Improved Utilization of Perioperative Services Following Separation of Out- and Inpatient Units Peter Mollenholt, MD; Brenda Gaebel, RHIT, Anesthesiology, OHSU, Portland, OR. Separation of outand inpatient surgery units results in increased efficiency for the Perioperative Services with sigificantly shorter anesthesia ready and recovery length of stay times.

## Geriatric Anesthesia:

A-47 Room 224–226, 10/17/2000 3:30 PM - 5:00 PM (PD) Spacial Memory in Young Adult and Aged Rats 1 and 3 Weeks after Anesthesia D.J. Culley, MD; R.Y. Yukhananov, MD, Ph.D.; M.G. Baxter, Ph.D.; G. Crosby, MD, Anesthesiology, Harvard Medical School/BWH, Boston, MA, United States. Using a spatial memory test, we demonstrate that prior general anesthesia attenuates the performance improvement normally associated with repeated testing in aged rats.

A-48 Room 224–226, 10/17/2000 3:30 PM - 5:00 PM (PD) Postoperative Cognitive Dysfunction Is More Common in the Elderly Following Major Surgery Terri G. Monk, MD; Cyndi W. Garvan, PhD; Duane E. Dede, PhD; Maria T. van der Aa, BS; Joachim S. Gravenstein, MD, Dept of Anesthesiology, University of Florida, Gainesville, FL, United States. POCD is more common in elderly (>60 yrs) than younger patients at 1 week and 3 months after major surgery. A-49 Room 224–226, 10/17/2000 3:30 PM - 5:00 PM (PD) The Relationship between Age and Postoperative Delirium in Patients with Normal Cognitive Function *B.C. Weldon, MD; C.W. Garvan, PhD; D.C. Olsen, BS; M.T. van der Aa, BS; T.G. Monk, MD, Dept of Anesthesiology, Univ of Fla, Gainesville, FL, United States.* Postoperative delirium is uncommon in young adults with normal preoperative cognitive function, however the incidence increases with age.

A-50 Room 224–226, 10/17/2000 3:30 PM - 5:00 PM (PD) The Incidence of Deep Vein Thrombosis in Patients with the Neck Fracture of the Femur Chiyoko Nagata, MD; Fumibaru Yanagi, MD, PhD; Seiji Kozuma, MD; Sinnichi Goto, MD; Hidenori Terasaki, MD, PhD, Anesthesia, Kumamoto Rosai Hospital, Yatsusbiro, Japan. DVT were detected with high frequency of 59% in the patients with fractures of the femoral neck. Duration of bed rest was the only predictor of DVT.

A-51 Room 224–226, 10/17/2000 3:30 PM - 5:00 PM (PD) Power Spectrum of Heart Rate Variability in the Geriatric Patients Undergoing Spinal Anesthesia Jongin Han, MD; Chibyo Kim, MD; Guiyong Lee, MD; Choonbee Lee, MD, Anesthesiology, Ewba Woman's University Hospital, Seoul, Korea. The sympathetic parasympathetic balance decreased for a long time after spinal anesthesia in geriatric patients with spectral analysis of HRV.

A-52 Room 224–226, 10/17/2000 3:30 PM - 5:00 PM (PD) Cardiac Surgery in the Elderly *Frederique Ryckwaert*, *MD*; *Paul Andre Chaptal*, *MD*; *Pascal Colson*, *MD*, *Service d'Anesthesie-Reanimation "B" CHU*, *Montpellier*, *France*. Mortality after cardiac surgery is increased in patients older than 75 years due to a greater mortality rate in case of complications.

A-53 Room 224–226, 10/17/2000 3:30 PM - 5:00 PM (PD) Health-Related Quality of Life (HRQL) and Life Satisfaction (LS) after Cardiac Surgery and Postoperative ICU - Treatment: Effect of Age Christian Stoll, MD; Markus Richter, MS; Georg Nollert, MD; Gustav Schelling, MD, Anaesthesiology, Ludwig Maximilians-University, Munich, Germany. Patients >70 ys had a comparable gain in HRQL and LS after cardiac surgery at a similar total cost of care.

A-54 Room 224–226, 10/17/2000 3:30 PM - 5:00 PM (PD) Anesthesiologists Are Not Discontinuing the New MAO Inhibitor Selegiline Preoperatively *J.F. Foss, MD; S. Daves, MD; M. O'Connor, MD, Anesthesia & Critical Care, The University of Chicago, Chicago, IL, United States.* Selegiline, a MAO-B inhibitor which may have opioid interactions, would be conservatively managed by discontinuation preoperatively.

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