A-1016 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
The First Train-of-Four Twitch Response as Predictor of Cisatracurium Reversal Time *Hans Kirkegaard-Nielsen, MD; James E. Caldwell, MB; Tom Heier, MD, Department of Anesthesia, UCSF, San Francisco, CA, United States.* T1 is a good predictor of cisatracurium reversal time, if the endpoint of reversal is TOF ratio 0.70. However, if the target TOF ratio is 0.90, T1 is a poor predictor of reversal time.

A-1017 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
Dose-Response and Onset/Offset Characteristics of Rapacuronium *Aaron F. Kopman, M.D.; Monika M. Klewicka, B.A.; Frank Flores, M.D.; Khurram Ghori, M.D.; George G. Neuman, MD, Anesthesiology, Saint Vincents Hospital & Medical Center, New York, NY, United States.* We found rapacuronium to be more potent than previously described, with an ED95 of 0.80 mg/kg. Its onset profile is similar to succinylcholine.

A-1018 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
Are There Stereospecific Effects of Atracurium and Cisatracurium on Mast Cell Activation in Human Skin? *Wolfgang Koppert, MD; James A. Blunk, MD; Lars J. Petersen, MD; Reinhard Sittl, MD; Martin Schmelz, MD, Department of Anesthesiology, University of Erlangen, Erlangen, Germany.* Stereospecific effects of atracurium and cisatracurium were found for efficacy, but not potency of mast cell activation.

A-1019 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
Conformational Mechanism of Actions of Gallamine *Chingmuh Lee, M.D.; Thomas Jones, Ph.D., Anesthesiology, UCLA Med Sch and Tripos, Los Angeles, St. Louis, United States.* Gallamine has many rotatable bonds, but limited conformational variability. Distance of 10.98-12.36 [angstrom] N-to-N explains neuromuscular block; of 4.21-4.45 [angstrom] N to vdw extension of O explains tachycardia.

A-1020 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
Dose-Response Study of Succinylcholine in Subjects Treated with Bambuterol *Hanne Lippert, MD; Ulla Bang, MD, Department of Anesthesia, Aarhus University Hospital, Aarhus N, Denmark.* In patients treated with bambuterol 2 hours before anaesthesia, succinylcholine 0.25-0.5 mg/kg allowed easy intubation within one minut with a 2.5 times prolongation of the neuromuscular block.

A-1021 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
Patient Tailored Infusion of Cisatracurium during General Anesthesia *Mohammad Maroof, MD; T.J. Gan, MD; W.S. York, MD; A. Monnig, BSN, Anesthesiology, University of North Carolina, Chapel Hill, NC, United States.* A steady state of relaxation and timely reversal is achieved by infusion of cisatracurium calculated by the individual patient's respose to the intubating dose of the relaxant.

A-1022 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
Cisatracurium - Results from a Post-Marketing Surveillance Study in Germany *Hermann Mellinghoff; Mahir Uslu; Christoph Diefenbach; Thomas Meuser, Dept. of Anesthesiology, University of Cologne, Koeln, Germany.* 2951 patients in German hospitals who had received cisatracurium were studied to determine the intubating conditions as well as the incidence of adverse events.

A-1023 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
Effect of Priming Intervals on the Onset of Cisatracurium Neuromuscular Blockade *Johann Motsch, MD; Anja Beilharz; Matthias Bock, MD; Bernd W. Bottiger, MD; Eike O. Martin, MD, Department of Anesthesiology, University Hospital Heidelberg, Heidelberg, Germany.* A priming interval of 60 sec accelerates cisatracurium onset, but > 180 sec increases the risk of partial nm-blockade.

A-1024 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
Outcome Evaluation of Patients after Muscle Biopsy for Malignant Hyperthermia Testing *Rainer Mueller, MD; Martin Anetseder, MD; Andreas Hoyer, MD; Edmund Hartung, MD, PhD; Norbert Roewer, MD, PhD, Dep. of Anesthesiology, University, Wuerzburg, Germany.* Physical handicap, pain and time off work for about 10 days are common problems affecting patients after muscle biopsy for Malignant Hyperthermia testing.

A-1025 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
Sepsis Attenuates the Neuromuscular Blocking Effects of d-Tubocurarine on Laryngeal Muscles by Presynaptic Mechanism *Kohki Nishikawa, MD; Eiichi Narimatsu, MD; Akiyoshi Namiki, MD, Anesthesiology, Sapporo Medical University School of Medicine, Sapporo, Hokkaido, Japan.* Sepsis-induced attenuation in the neuromuscular blocking effects of dTc on laryngeal muscles

A-1026 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
Potency of New Muscle Relaxants on Recombinant Muscle-Type Acetylcholine Receptors *Matthias Paul, M.D.; Christoph H. Kindler, M.D.; Mark J. Dressler, M.S.; Spencer Yost, M.D., Department of Anesthesia, University of California, San Francisco, CA, United States.* Using the *Xenopus* oocyte model for muscle-type acetylcholine receptors Rocuronium was shown to be more potent than Rapacuronium.

A-1027 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
New Method To Neuromuscular Block Monitoring *Josep Rodiera, M.D. Ph.D.; Jose Rodriguez-Paz, M.D.; Luis Aliaga, M.D. Ph.D.; Esther Santacana, M.D., Department of Anesthesia, Centro Medico Teknon, Barcelona, Spain.* SUMARY: This study seeks to evaluate a new method of monitoring the neuromuscular block, based on the blood pressure cuff; and to test the capacity of the new method to measure the level of block.

A-1028 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
Onset of the Neuromuscular Block at Orbicularis Occuli: Visual Estimation Versus Accelerography *Velislav Slavov, MD; Cyrus Motamed, MD; Inanna Gabriel, MD; Gilles Dhonneur, MD; Philippe Duvaldestin, MD, Dept of Anesthesiology, Henri Mondor University Hospital, Creteil, France*

A-1029 Room I, 10/16/2000 2:00 PM - 4:00 PM (PS)
Increased Plasma Binding Increases Onset Time Rocuronium Blockade in Rats *Carlos Wilkerson, M.D., Ph.D; Joanne Vesci, B.Sc; Donna Geathers, Anesthesiology, Jefferson Medical College, Philadelphia, PA, United States.* Addition of α-1-acid glycoprotein (AAG) increases onset time of neuromuscular blockade by 20% following a rocuronium bolus when compared to controls for all 6 rats.