A-1151 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) Is the Use of Succinylcholine Safe for Rapid Sequence Induction of Anesthesia? Agnes Hayes, FFARCS; Joan E. Reid, FFARCS; Dara S. Breslin, FFARCS; Rajinder K. Mirakhur, MD, Anaesthetics and intensive Care Medicine, The Queen's University of Belfast, Belfast, N Ireland, United Kingdom. Use of succinylcholine does not always guarantee safety against oxygen desaturation during RSI.

A-1152 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) The History of Chemical Lumbar Sympathectomy Jianbong Huang, MD, Pain Management Center, Cleveland Clinic Foundation, Cleveland, OH, United States. Surgeons were pioneers in the early history of the development of chemical lumbar sympathectomy. Anesthesiologists played an important role in the late history of the development of chemical lumbar sympathetomy.

A-1153 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) Airway Complications Following Cervical Spine Surgery Jeffrey A. Katz, MD; Mark Ancheta, BA; William A. Shapiro, MD; Philip Weinstein, MD; Geoffrey T. Manley, MD, Anesthesia, UCSF, San Francisco, CA, United States. Patients undergoing multi-level anterior cervical spine surgery, high cervical spine or anterior-posterior surgery are at risk for postoperative respiratory distress requiring reintubation.

A-1154 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) The Earliest Anesthetics in the Western United States Roger L. Klein, M.D., Anesthesiology, Oregon Health Sciencies U., Portland, OR, United States. The first documented anesthetics in the western U.S. were administered in 1848, by Forbes Barclay in the OR terr. and S. Caldwell in St. Louis. This information was obtained from archives in OR, WA, NM, MO, and also Winnepeg and the Wood Library.

A-1155 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) The Use of a Computer-Assisted Multimedia Presentation (CAMP) to Convey Preanesthetic Information to Patients Undergoing General or Regional Anesthesia Werner F. Madei, MD PhD; Matthias H. Hammrich, MD; Hans P. Klieser, MD PhD, Anesthesiology and Intensive Care, German Army Hospital, Amberg, Oberpfalz, Germany. CAMP for preanesthetic information has an anxiolytic effect and improves patient outcome.

A-1156 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) Intravenous Iron Therapy for Correction of Acute Postoperative Anemia Following Cardiac Surgery Samia Madi-Jebara, MD; Alexander Yazigi, MD; Fadia Haddad, MD; Gemma Hayek, MD; Marie-Claire Antakly, MD, Anesthesiology, Hotel-Dieu de France, Beirut, Lebanon. Ferric sucrose complex (venofer*), a new IV form is safe and efficient in the treatment of acute anemia following cardiac surgery.

A-1157 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) The History of Epidural Anesthesia: Pages, Dogliotti, Guiterrez & Ruiz Mark G. Mandabach, MD, Department of Anesthesiology, The University of Alabama at Birmingham, Birmingham, AL, United States. Pages(Spain,1921) & Dogliotti(Italy,1931) discovered epidural anesthesia [EA]. Gutierrez & Ruiz(Argentina,1932) were agressive in utilizing EA; by 1933, 80% of cases were done under EA.

A-1158 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) Does the Severity of Sleep Apnea Hypopnea Syndrome Increase the Risk of Perioperative Complications? Manjula, M.D.; Arthur J. Klowden, M.D.; Ninos J. Joseph, B.S.; Natarajan V. Raman, M.D.; M. Ramez Salem, M.D., Dept Anesth, Illinois Masonic Med Ctr, Chicago, IL, United States. Severe Sleep Apnea Hypopnea Syndrome coupled with morbid obesity increases the risk and severity of perioperative complications.

A-1159 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) Intermediate Duration Neuromuscular Blocking Agents and Post-operative Residual Curarization Rajinder K. Mirakhur, MD; Agnes Hayes, FFARCS; Joan E. Reid, FFARCS; Dara S. Breslin, FFARCS, Anaesthetics and Intensive Care Medicine, The Queen's University of Belfast, Belfast, N Ireland, United Kingdom. Postoperative residual curarization continues to occur with intermediate duration relaxants.

A-1160 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) History of the Intravenous Cannula Jeff Pasternak, M.D.; Gary Vasdev, M.D.; Chris Burkle, M.D.; Peter Soutborn, M.D., Anesthesiology, Mayo Clinic, Rochester, MN, United States. The development of intravenous anesthesia may be traced to improved pharmacokinetics of short acting barbituates and the development of the IV cannula. This review highlights the early history of the IV cannula.

A-1161 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) Methods of Peri-operative Analgesia Described by Pliny the Ancient Gaetan Plantefeve, MD; Philippe Juvin, MD; Jean-Marie Desmonts, MD, Anesthesiology, Bichat Hospital, paris, France. We analyze peri-operative analgesia methods recommended in the "Natural History" written by Pliny The Ancient.

A-1162 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) Temporomandibular Joint Function and Difficult Laryngoscopy in Acromegalics Hubert Schmitt, MD; Thomas Morneburg, MD; Peter Proeschel, PHD, Anesthesiology, University Erlangen, Erlangen, Germany. In 16 acromegalics scheduled for surgery we measured jaw mobility. In 5 patients with difficult laryngoscopy (grade III), jaw protrusion was restricted, but the difference gained no significance.

A-1163 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) Arthur E. Guedel (1883 - 1956): Self-Trained Pioneer JoAnn C. Thomson, MD, Anesthesiology, The Mount Sinai Medical Center, New York, NY, United States. The life of Arthur E. Guedel is most fondly remembered through his work, passion and dedication to the discipline of anesthesiology and his concern for the safety and well-being of all patients who receive anesthesia.

A-1164 Room G, 10/17/2000 9:00 AM - 11:00 AM (PS) Wartime Training of United States Military Anesthetists in World War II David B. Waisel, MD, Department of Anesthesia, Children's Hospital, Boston, MA, United States. World War II was a milestone in the growth of anesthesia as a physician specialty. One component of this growth was wartime education in anesthesia. This abstract discusses four cohorts of U.S. anesthesia training during the war.