



Medical Humanities and the Arts

Doing It Anyway

Samuel Rodriguez, MD

A young boy with a backpack and toy weapons walks into an immense forest – alone. Is this how he imagines the world when he plays in his bedroom? Can his exercises in imagination help prepare him for real-world adversity that he will face? What is our role as physicians in harnessing the power of a child’s imagination and shepherding him or her through health care challenges?

As pediatric anesthesiologists, we are frequently required to evaluate children regarding the need for sedation and general anesthesia. It can be very difficult to predict which kids will require pharmacologic interventions and which ones will succeed with education, distraction, and reassurance. Health care procedures are



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many times the most challenging events in a person’s life, and we as anesthesiologists are tasked with the consequential decision of how to get them through it. For many kids, we will choose to render them unconscious and bring them back when the event has concluded. For some kids, we will engage their imagination, build their confidence, and help them to realize that courage isn’t the absence of fear – it is being scared, but doing it anyway. ■

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Timing of surgery after ischemic stroke (December 2022)

The risk of perioperative stroke is increased in patients with a prior ischemic stroke, though optimal timing of surgery after stroke is unclear. In a database study including nearly 6 million patients, the risk of postoperative ischemic stroke was increased eightfold in patients who had a stroke within 30 days before surgery, compared with those who never had a stroke.¹ The risk of recurrent stroke decreased and leveled off for surgery between 60 and 90 days after stroke, but remained elevated. The timing of surgery in patients with prior ischemic stroke should consider the risk of recurrent stroke and the risk of delaying surgery. We suggest delaying elective surgery for at least three months, and if possible up to nine months, after a stroke to reduce the risk of recurrence.

1. Glance LG, Benesch CG, Holloway RG, et al. Association of Time Elapsed Since Ischemic Stroke With Risk of Recurrent Stroke in Older Patients Undergoing Elective Nonneurologic, Noncardiac Surgery. *JAMA Surg* 2022; 157:e222236.

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