

Comparison of Propofol and Thiopentone with Lidocaine in Facilitating Laryngeal Mask Insertion

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Conditions for insertion of laryngeal mask airway (LMA) in 60 unpremedicated, ASA I, adult patients scheduled for elective surgery were assessed in a randomized, single-blinded trial. Each patient received fentanyl 1 mg/kg-1 follow by either 2.5 mg/kg propofol (gr.P), or a sequence of 1.5 mg/kg lidocaine and 2 minutes later 5 mg/kg thiopentone (gr.LT). Gagging coughing, laryngospasm, number of attempts for successful insertion were graded and haemodynamic data were recorded after LMA insertion. Conditions for LMA insertion were considered as excellent, good, poor and unacceptable.

There was no significant difference between two groups regarding to gagging coughing, laryngospasm, attempts for successful insertion and condition for insertion.

For haemodynamic data, there was no significant difference between the two groups but the decrease in systolic blood pressure more than 20% after induction in propofol group were detected more frequently than in lidocaine-thiopentone group. (23.3% vs 3.3%)

We conclude that thiopentone preceded by intravenous lidocaine provides condition for LMA insertion as good as those of propofol. The drugs may be used as an alternative for propofol.