Effect of IV Atropine (Pre-induction of Anesthesia) on Prevention of Incidence and Severity of OCR in Children Undergoing Strabismus Surgery

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Objective: To study the prevention of oculocardiac reflex by atropine. Forty pediatric patients under going eye muscle correction were studied. The patients were double blind randomized divided into 2 groups to receive either atropine 0.01 mg/kg (group A) or NSS (group B) in equal volume prior to induction or as soon as the intravenous line were established. Any changes of heart rate in response to eye muscle traction during operation were recorded as oculocardiac reflex. The result showed no statistical significant difference in demographic data, base line of heart rate, systolic pressure and number of operated eye muscle. No statistical significant difference in the incidence of heart rate change was 80.95 percent in group A, and 92.86% in group B. In the changed group; the oculocardiac reflex were severe in the control group as compared to the atropine group. We concluded that atropine administration cannot prevent the incidence of oculocardiac reflex but can lessen the severity of the incidence.

Key words: Oculocardiac reflex, atropine.

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