

OP. 61

TO IDENTIFY THE INCIDENCE AND RISK FACTORS OF EMERGENCE AGITATION FOLLOWING NASAL SURGERY UNDER GENERAL ANAESTHESIA: A PROSPECTIVE OBSERVATIONAL STUDY

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Aim: To identify the incidence and risk factors of Emergence Agitation (EA) following nasal surgery under general anaesthesia (GA).

Methodology: All consecutive patients between age group 17-70 yrs, ASA I-III, posted for elective nasal surgery under GA were assessed for EA post-operatively till discharge from PACU and 24 hours after the surgery. Patients diagnosed with neurological disease, on neuroleptics/ benzodiazepines or antidepressants for >2 weeks prior to surgery were excluded from the study. Patients in the post-anaesthesia care unit with a Richmond Agitation Sedation Scale $\geq +1$ at any time were considered to have EA. Parametric data was presented as mean and non-parametric data was compared using chi square test. Relative risk was calculated for incidence of EA, while associated risk factors were analysed by logistic regression. P value <0.05 was considered significant.

Result: The overall incidence of agitation was 27.5%. Univariate analysis showed that Visual anxiety scale ≥ 5 , males, smoking, hypertension, use of benzodiazepines, ASA II,III>I, post-op pain and prolonged sevoflurane use were associated risk factors for development of EA.
Conclusion: EA following GA in nasal surgery remains a significant post-anaesthetic problem that interferes with post-operative recovery. Therefore, understanding risk factors is important for appropriate differentiation and treatment of agitation in such patients.