Different sedation practices in a bronchoscopy unit. Does it really matter?

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Background

At the bronchoscopy unit in Mater Dei Hospital there is a wide variation among respiratory teams regarding the use of sedatives and local anaesthesia (LA) during flexible bronchoscopy (FB). An ideal sedative should result in improved safety, as well as enhancing patient tolerance and comfort.

Aim

To assess if there is a disparity in patient comfort between different sedation practices.

Methods

All consenting patients undergoing FB over 18 months were included prospectively. Bronchoscopy nurses completed a survey at the end of each FB. Likert's scale (0-10): rating ease and comfort of FB; and Ramsay scale: assessing depth of sedation, were used.

Patient phone surveys were conducted on the same day using Likert's scale. Bronchoscopy notes were reviewed regarding choice of sedative and LA. Data was analysed by SPSS, using Kruskall Wallis and Chi square tests.

Results

From a total of 259 FB, 124 patients had to be excluded. Of the included 135 patients, 74.8% were males. The mean age was 64 (Range: 22-87).

14.8%, 61.5%, and 23.7% were given alfentanil (group A), midazolam (group B), and both alfentanil and midazolam (group C) accordingly.

Doctors’ ease of execution (as scored by nurses) favored group C with MRS 8.25 vs 8.2 in group A and 7.7 in group B (p=0.272).

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Over sedation was comparable among the 3 groups. With regards to under sedation a notable difference was noted. There were 5% patients in group A, 19.3% in B and 9.4% in C.

Conclusions

There is conformity in patient-reported comfort between all 3 sedation practices in Malta. Nurse-reported patient comfort however favoured alfentanil. The majority of under sedated patients were in the midazolam group.

References

3. RJ Jose et al. Sedation for flexible bronchoscopy: current and emerging evidence. ERJ 2013
5. Lechtzin et al. Patient satisfaction with bronchoscopy. AJRCCM 2002

Mean Rating Scale for anxious personality and anxiety on the day of the procedure did not differ among the three groups.

MRS for patient anxiety, comfort during LA, comfort during tube insertion and comfort during rest of procedure including dyspnoea and cough were similar in all groups.

All patients in the Alfentanil group are willing to have the procedure repeated, against 96% in Midazolam group and 93% in the mixed group (p= 0.508)

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