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Title: Patient survey to assess methods of local anaesthesia during bronchoscopy

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Body: Introduction: To anaesthetise the vocal cords during bronchoscopy there are 2 methods used in the Northwest of England, transcricoid lidocaine or administering it directly through the bronchoscope. The choice between the two methods is largely down to individual choice and there has been little work comparing them. Methods: Patients filled in a 10 point questionnaire (using a visual analogue scale) 1-2 hours after bronchoscopy. All had a 2-4mg dose of IV midazolam as a sedative, this has the supposed benefit of inducing retrograde amnesia. Results: We surveyed 30 patients between the ages of 40-82, 24 were outpatients. 95% of patients strongly agreed that the bronchoscopy was better than expected, 16% of patients (5/30) were unsure of follow up arrangements. 47% of patients (14/30) could remember the procedure fully. 27/30 patients had the method of local anaesthesia noted (12 transcricoid, 15 direct vision). 66% (8/12) who had the transcricoid approach reported little or no choking compared to 26% (4/15) in whom the lidocaine was administered directly through the scope, which was significant (p 0.06) There was no difference in other measures such as coughing. Conclusion: This survey has raised several points, firstly we need to improve our communication with patients regarding follow up arrangements. Secondly a significant proportion of patients recalled the procedure fully and we should consider other sedative medication if we want to induce amnesia. Finally there was a significant difference between the 2 methods with regards to choking sensation. This could be an indication that the transcricoid approach is superior to direct vision in some aspects. We have commenced a follow up study to assess this.