

European Respiratory Society Annual Congress 2013

Abstract Number: 5279

Publication Number: P3775

Abstract Group: 1.4. Interventional Pulmonology

Keyword 1: Bronchoscopy **Keyword 2:** Pharmacology **Keyword 3:** Health policy

Title: Lidocaine use in bronchoscopy: A UK national survey

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Body: Introduction: The current guideline on flexible bronchoscopy stipulates a maximum total dose of lidocaine to be 8.2 mg/kg in adults with extra care in elderly, hepatic and cardiac dysfunction. Higher dose can be associated with complications. Anecdotally, practice in the UK varies widely. We attempt to ascertain the current practice among respiratory physicians. Methods: An online questionnaire was sent via the Regional Deaneries to try to reach a large proportion of Respiratory Consultants & Trainees in the UK. It included knowledge of safe dose of lidocaine, mode of maximum dose calculation, documenting recent lidocaine usage and strength and formulations of lidocaine used. Results: 105 physicians responded (63% trainees & 37% Consultants).

60% do not calculate safe dose. Lidocaine usage in previous 24 hours was not checked by 88%. 61% used 2% Lidocaine, 21% used 1% & 23% used combination. For nasal passage 72% use gel and 10% use spray. For oropharynx, 90% used sprays. For vocal cords and beyond, most respondents use fixed number of doses. Conclusion & Discussion: Majority of bronchoscopists do not calculate safe dose of lidocaine. There is wide variation of practice across the UK. Calculating safe dose of lidocaine before hand, and using 1% solution can potentially reduce total lidocaine use & hence be safer for patients. Guideline in this respect is needed for a more standardized & safer practice.