Management of pediatric difficult airway with Shikani Optical Stylet (SOS)
Mohanad Shukry, MD; Usha Ramadhyani, MD; Joseph R. Koveleskie, MD
Department of Anesthesiology, Tulane University, New Orleans, LA

Introduction: The airways of many craniofacial and mandibulofacial malformations often present unique challenges to the anesthesiologists inside and outside the operating room (1). In the literature, many methods have been reported on how to deal with these difficult airways (2,3). Laryngeal mask airway (LMA), flex fiberoptic scope, augustine stylet and many other instruments have been used with different success. Fortunately, equipment has radically improved over the last several years and made it possible to visualize and intubate a difficult airway. The Shikani Optical Stylet™ (SOS) (Clarus Medical) consists of a malleable stainless steel fiberoptic stylet, a removable fixed focus eyepiece, and either a portable battery operated light source and handle, or an independent surgical light source connected via a fiberoptic light cable. The device comes in adult and pediatric version. The pediatric scope is 27 cm long and 2.1mm in diameter and can accept an ETT as small as 2.5 mm.

Methods: We present two cases, in which we successfully visualized and intubated a 19 month old infant with Pierre Robin Sequence (PRS) and a 2-month-old infant with Treacher-Collins syndrome and situs inversus using (SOS).

Results: The technique is easy to perform, less traumatic and less time-consuming than multiple attempts laryngoscopy or blind tracheal intubation.

References: