AIRWAY OBSTRUCTION IN AN UNPLANNED EXTUBATION IN A CHILD WITH CLEFT PALATE AND ANTICIPATED DIFFICULT INTUBATION

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DISCUSSION

Pre-anaesthesia management

- Scheduled for repair of cleft palate at one year
- She was found to have an upper respiratory tract infection necessitating treatment
- There had been two previous history of difficult intubation attempt
- Was informed in the management of airway on the third attempt.
- The patient was categorized according to the American Society of Anesthesiologists Physical status Class II.
- The laboratory results were within normal limits except for sinus tachycardia on the electrocardiogram.
- Contingency plans for airway management were made available.
- Proper planning and preparations are essential elements in the management of extubation of a patient with difficult airway.

Case presentation

SA, a sixteen month old 6Kg female child with cleft palate for repair presented at the age of four months.
- There was history of failure to thrive, poor sucking of breast and recurrent chest infections.
- Examination revealed a clinically ill-looking infant, small for age.
- There was a cleft of the secondary palate, the gingiva were normal.
- The cardiovascular and central nervous systems were normal.
- The respiratory system showed tachypnoea, 40 cycles/minute, no dyspnoea with transmitted sounds on both lung fields.

References

- Complex problems managed by trainees lacking the appropriate airway skills, should be discouraged.
- A more senior anaesthetist especially paediatric anaesthetist or other clinicians performing airway management should be present also during extubation to manage crisis.

Conclusion

- Proper planning and preparations are essential elements in the management of extubation of a patient with difficult airway.
- A difficult airway management committee should be organized in each tertiary hospital in Nigeria to formulate protocols and manage patients with anticipated airway difficulty as found in developed worlds.
- Safety has no border hence at every stage of management of a patient with difficult airway optimum manpower and equipment must be available to prevent catastrophic outcome.