

Special Problems Of Anesthesia For Little People

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With regard to the special problems of anesthesia for Little People, below I have summarized them for you.

There are many different types of disproportionate short stature and each has a specific set of complications that may be associated with that type. However, there are some generalizations that can be made about all types of short stature if surgery is required:

1. Remind your physician and anesthesiologist that the dose of both anesthesia and other medications should be related to weight; that Little People do not take the average adult size of medication, but may require much less.
2. Little People often have small tracheas or breathing tubes and when intubating, i.e. putting a tube down to breathe for an individual, it may take a smaller tube or a pediatric size tube may be required.
3. Many individuals with different types of chondrodystrophies do not have normal bone structure in the neck. Because of this the nerves to the neck can sometimes be squashed if special care is not given to supporting the neck during surgery and when a patient is anesthetized. Thus it is extremely important that the surgeon and anesthesiologist beware of possibility and support the neck and head while the individual is unconscious.
4. The joints in chondrodystrophies do not have full range of motion, and will not completely straighten out. Thus when an individual is anesthetized it is important not to put extra stress on those joints or attempt to straighten them completely.
5. Many types of chondrodystrophies are associated with clefts of the palate or submucous clefts. It is important to be aware of these clefts since they may lead to aspiration or incomplete closure on insertion of breathing tubes.
6. Many specific types of chondrodystrophy have particular complications to which they may be prone. In achondroplasia for an instance the spinal canal is small, and there is some greater risk of squashing the nerves in the spinal cord.
7. Specifically, spinal anesthesia should not be used in achondroplasia. This may possibly lead to complications if a pregnant woman with achondroplasia has a cesarean section since the usual anesthesia for cesarean section is a spinal anesthesia. However, it is important that instead, general anesthesia be used in this situation.

8. In all chondrodystrophies which affect the spine (spondyloepiphyseal dysplasia, spondylometaphyseal dysplasia, mucopolysaroidosis) there may be absence of some of the structures of the neck and backbone that can lead to the vertebrae rubbing on each other. Specifically there can be lack of a structure called the odontoid in the high neck region that can lead to squashing of nerves in that area.

9. In osteogenesis imperfecta it is easy for bones to break, therefore during surgery or anesthesia it is important that individual with osteogenesis imperfecta may be a little more prone to an unusual reaction with anesthesia where the temperature goes very high, causing fever.

The listing of these complications is not intended to frighten any individual who requires surgery, but rather to prepare his/her doctor and anesthesiologist for any possible complication so that the complication can be avoided or treated appropriately.