

ANAESTHESIA


A GUIDE FOR PATIENTS



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What Is Anaesthesia?

Anaesthesia stops you from feeling pain during surgery and can be administered in many ways:

- General anaesthesia is a drug-induced loss of consciousness that even with painful stimuli you are unarousable.
- Sedation is the use of small amounts of one or more sedative drugs that depresses your consciousness or reduces your awareness to the surroundings.
- Local and regional anaesthesia involves injections which numb parts of your body. You stay conscious but you are pain free. This technique may be used in combination with general anaesthesia or sedation.

Your Anaesthesiologist

An anaesthesiologist is a specialist doctor who:

- Administers the anaesthesia and maintains the safety and quality of your care during and immediately after anaesthesia.
- Manages any blood transfusion that you may need during the surgery.
- Participates in your care in the Intensive Care Unit (if needed).

What Are The Risks Of Anaesthesia?

Modern anaesthesia is very safe. Although risks cannot be removed completely, serious complications are very rare. Risks relating to anaesthesia are dependent on:

- Whether you have any other illness
- Personal factors like smoking or being overweight
- The type and duration of the operation

Common side effects (occurring: 1 in 10 to 1 in 100 patients)

- Feeling sick and vomiting
- Sore throat
- Blurred vision
- Headache
- Pain and bruising at injection sites
- Problems in passing urine

Uncommon side effects (occurring: 1 in 1,000 patients)

- Chest infection
- Damage to teeth, lips and tongue
- Worsening of an existing medical condition

Rare side effects (occurring: 1 in 10,000 patients)

- Damage to eyes and nerves
- Serious allergy to the drugs used
- Stroke
- Heart attack
- Death

The risks are higher if you

- Are older
- Smoke
- Are an excessive drinker
- Are overweight
- Are suffering from the following
 - a bad flu
 - asthma
 - diabetes
 - heart disease
 - kidney disease
 - high blood pressure
 - neurological diseases, epilepsy, stroke

What You Should Do Prior To Elective Surgery

- **Giving up smoking for several weeks before the operation reduces the risk of chest problems. If you cannot do so, cutting down will help.**

- **If you are very overweight, reducing weight will reduce many of the risks of anaesthesia.**
- **If you have loose or carious teeth you should seek dental treatment prior to the operation.**
- **If you have a long standing medical problem like diabetes, asthma, thyroid problem, epilepsy or high blood pressure, you need to**
 - be re-assessed and stabilised before your operation and anaesthesia.
 - know which medications can be taken right up to the day of the surgery and which medications have to be stopped before the surgery.
- **If you feel unwell because you have a flu or some other illness, please inform your doctor before you come to the hospital for surgery.**
- **Inform your anaesthesiologist of:**
 - all your medical conditions
 - all your medications (including herbal remedies or supplements) you are currently taking
 - any allergies you may have
 - any previous anaesthesia that you may have had especially if there had been any associated problems

- **Fasting Instructions**

Fasting before surgery is an important aspect of anaesthesia as it defines a period of time when you are not allowed to eat or drink to prevent the possibility of aspiration of gastric contents into the lungs. This can occur at induction of anaesthesia, during a procedure or immediate period after surgery.

Ingested Material	Minimum Fasting Period
Clear liquids*	2 hours
Light meal**	6 hours

* **Clear liquids:** plain water, fruit juices without pulp (eg. apple juice), soft drinks, tea or coffee without milk

** **Light meal:** one slice of bread with butter or 2 pieces of crackers with milk/ coffee/ tea/ juice

Your doctor's instructions will supersede the above fasting instructions.

IF YOU DO NOT FOLLOW FASTING INSTRUCTIONS, YOUR OPERATION MAY HAVE TO BE POSTPONED TO A LATER DATE FOR YOUR OWN SAFETY.

The Benefits Of Short Preoperative Fasting

- Avoid delays and cancellations
- Decrease risk of dehydration and low blood sugar from prolonged fasting
- Improve patient satisfaction
- Lessen some side effects and complications during and after surgery

Anaesthesia On The Day Of Surgery

You will be seen by your anaesthesiologist who will

- Ascertain your general fitness and health
- Explain and plan your anaesthesia with you
- Explain some of the anaesthesia-related risks and answer any questions or clarifications that you may have regarding the anaesthesia

Premedication (“Pre-Med”)

A ‘pre-med’ refers to medications which may be given by your anaesthesiologist to help calm you down before you are sent to the operating theatre.

General Anaesthesia

There are two ways of starting a general anaesthesia:

- Anaesthetic drugs may be injected into a vein (generally used for adults).
- You can breathe the anaesthetic gases through a mask (generally used for children).

Your anaesthesiologist will stay with you throughout the operation and anaesthesia until you have recovered sufficiently from the effects of the anaesthesia.

As soon as the operation is over, the anaesthesiologist will reverse the anaesthesia so that you will regain consciousness.

Local And Regional Anaesthesia

- Your anaesthesiologist will give you the necessary injections to block pain in the area that is to be operated upon.
- The surgery will only start when your anaesthesiologist is sure that you are comfortable and the area to be operated on has been completely anaesthetised.
- If you had not been given any sedation, you will remain alert and aware of your surroundings.
- A screen shields you from the operating site. You will not see the operation.
- Your anaesthesiologist will always be near you and you can speak to him or her whenever you want to.

Your Recovery From Anaesthesia

You will be taken to the recovery room and the recovery room nurses will watch over you at all times. The anaesthesiologist will discharge you back to the ward when you have recovered sufficiently from the anaesthesia and when the anaesthesiologist feels that it is safe for you to do so.

How Is Pain Managed?

The choice of pain relief depends on the type of surgery, your health condition, your doctor's advice and your preference. Medications will be given to you in incremental doses and different combinations until you are comfortable.

Analgesics may be administered as:

- Pills or Syrups
- Suppositories
- Injections
- Patient-Controlled Analgesia (PCA)
- Local anaesthesia and regional blocks

How Will I Feel After The Anaesthesia

This will depend on:

- The type of anaesthesia
- The nature of the operation
- The amount of pain relief you need (this varies from person to person)
- Your general fitness

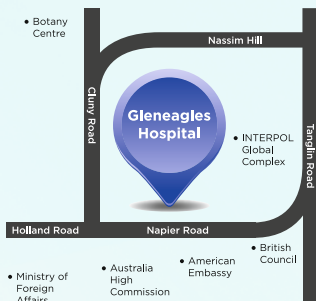
Things To Avoid After General Anaesthesia/Sedation

Anaesthetic and Sedative Drugs will affect your judgment for about 24 hours.

During this period you should not undertake any activity that may put you or others at risk:

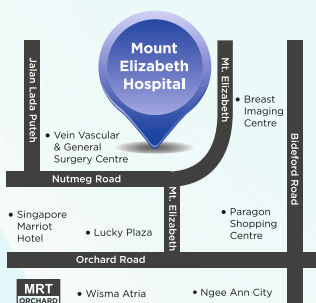
- Do not drive any form of vehicle
- Do not operate any machinery including cooking equipment
- Do not make important decisions or sign a legal document
- Do not drink alcohol or take any form of sedative
- Have a responsible person accompany you home and stay with you for the first night after your surgery if you go home on the day of the operation

For enquiries, please contact us at:



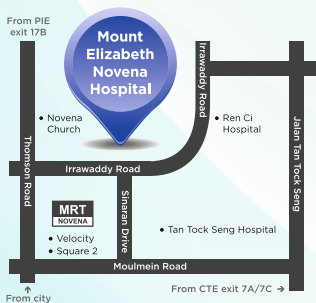
Gleneagles Hospital

6A Napier Road
Singapore 258500
Tel: **(65) 6473 7222**
Email: gpac@parkway.sg
www.gleneagles.com.sg



Mount Elizabeth Hospital

3 Mount Elizabeth
Singapore 228510
Tel: **(65) 6737 2666**
Email: mpac@parkway.sg
www.mountelizabeth.com.sg



Mount Elizabeth Novena Hospital

38 Irrawaddy Road
Singapore 329563
Tel: **(65) 6933 0000**
Email: mnpac@parkway.sg
www.mountelizabethnovena.com



Parkway East Hospital

321 Joo Chiat Place
Singapore 427990
Tel: **(65) 6344 7588**
Email: pepac@parkway.sg
www.parkwayeast.com.sg