Interaction of suxamethonium with intravenous induction agents

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Since the eugenol anaesthetics prolong the action of suxamethonium when the steroid intravenous agent, Althesin (alphaxalone 9 mg/ml, alphadolone acetate 3 mg/ml), was introduced it was necessary to study its interaction with this relaxant. These findings are reported here and compared with previous findings with three other groups of induction agents or with lightly anaesthetized inhalational control series.

All observations were carried out on adult patients premedicated with 0.6 mg atropine. The effects of 25 and 50 mg suxamethonium were studied. Three barbiturates (thiopentone 4 mg/kg, thialbarbitone 8 mg/kg and methohexitone 1.6 mg/kg) were given to equal numbers of patients. Two eugenols (propanidid 4 mg/kg and G 29,505 4 mg/kg) were used, 100 in each series receiving propanidid. The dose of Althesin was 50 μ l/kg and that of ketamine was 2 mg/kg. The smaller dose of suxamethonium was studied in fit women while the 50 mg dose was studied in completely unselected patients. The time of the first respiratory effort was noted and also when respiration was judged to be clinically adequate.

The frequency and average duration of apnoea was not significantly different during light inhalation and barbiturate anaesthesia. Although respiratory depression was longer with barbiturates (t=2.74; P<0.01), this difference is of no clinical significance.

Suxamethonium	Twenty-five (25)				Fifty (50)			
No. of patients Apnoea:	Inhala- tional 50	Barbitu- rates* 150	Althes- in 50	Euge- nols* 125	Barbitu- rates† 300	Althes- in 100	Euge- nols† 150	Keta- mine‡ 62
% frequency Av. duration (sec)	70	67	70	87	100	99	100	100
—all cases —apnoeic cases	61 ± 7.0	69±5	74 ± 8	$136\!\pm\!16$	$196\!\pm\!10$	211±9	326 ± 11	328 ± 13
only Respiratory	94±7·1	1,031 ±5	105±6	155±9				
Depression: Av. duration (sec)	147±5·7	$\textbf{167} \pm \textbf{5}$	169 ± 9	260±9	321 ± 11	311 ± 10	$\textbf{459} \pm \textbf{31}$	$\textbf{451} \pm \textbf{18}$

Respiratory depressant effects of 25 and 50 mg suxamethonium given immediately after four different groups of induction agents. Data from *Clarke, Dundee & Daw, 1964; † Clarke, Dundee & Hamilton, 1967; †Bovill et al. 1971.

The findings with the three barbiturates were almost identical as were those with the two eugenols. There was no significant difference between the respiratory effects of suxamethonium after a barbiturate or steroid anaesthetic. Its action was significantly prolonged after the eugenols as compared with those patients given either a barbiturate or steroid (P < 0.01 in 25 mg suxamethonium study and P < 0.001 in 50 mg study). Ketamine also prolonged the effect of suxamethonium in a manner quantitatively similar to the eugenols.

The action of the eugenols has been attributed to their effects on plasma pseudocholinesterase but no explanation can be offered for that of ketamine.

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