

## Epidural catheter insertion during general anesthesia

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To the Editor:

We read with great interest the publication by Terasako [1] in the recent issue of the journal about the experience of epidural catheter placement in anesthetized patients. They demonstrated that epidural puncture under general anesthesia might be acceptable in some conditions, especially for orthopedic patients. More than 500 patients were enrolled into the study, and no neurological complication related to epidural catheter was observed. Insertion failure was limited in only 4 patients.

Not only the validity and safety but also the ease for patient positioning would be confirmed in the study [1]; however, it leaves room for discussion. One of our concerns is that there is a possibility to reduce the success rate of catheterization. After the induction of general anesthesia, almost all patients required orotracheal intubation and mechanical ventilation with mandatory positive airway pressure. When the patient is in the awake state, the instruction for deep breathing expanded the potential cavity of the epidural space [2], and the expanding technique is

believed to obtain a desirable setting for catheterization [3, 4]. In contrast, positive pressure ventilation might decrease the space and impede epidural catheter insertion.

Although the difference of placement site, e.g., thoracic or lumbar catheterization, could be crucial, epidural insertion in anesthetized patients still requires exceptional care for the clinicians.

### References

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