

'Preemie' babies may face long-term anesthesia risks

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(HealthDay)—Children born prematurely may be at risk for



complications from anesthesia and sedation at least into young adulthood, a new study suggests.

"Perhaps we should look at these children differently and provide different care to them," said study lead author Dr. Jeana Havidich, a pediatric anesthesiologist at Dartmouth-Hitchcock Medical Center in Lebanon, N.H.

Premature babies often face medical issues that require <u>diagnostic tests</u> and procedures, even as they grow older, the study noted. And physicians know prematurity puts these people at higher risk when they need to be sedated, Havidich said.

"We have a sense of heightened awareness, a gut feeling that these children are more challenging to manage," she added. But it's not clear, she said, at what point that risk goes away.

The new study attempted to answer that question. The researchers examined the medical records of more than 57,000 young people, ranging from newborns to 22 years old, who were sedated or anesthetized for non-operating room procedures such as MRIs. They focused on 685 patients born before the 37th week of pregnancy. (A fullterm pregnancy is considered to be about 40 weeks.)

Almost 15 percent of those who were preemies suffered from anesthesia <u>complications</u>, such as disrupted breathing, airway obstruction and lack of oxygen, compared to 8.5 percent of non-premature children. None of the patients born prematurely died or required emergency hospitalization, however, the study found.

Havidich said it's hard to pin down the reasons for the difference in the two groups. Being born prematurely could lead to neurological impairments or lack of proper lung development, she said. And those



born prematurely may have other medical problems related to their early birth, she said.

According to Havidich, it's not clear if severely <u>premature babies</u> suffer more complications from anesthesia than babies born closer to term. Future research could examine this issue, she said. It's also not clear how far past 22 years of age someone born early may face a higher risk of complications.

Dr. Kanwaljeet Anand, a professor of pediatrics and anesthesiology at Stanford University School of Medicine, in Palo Alto, Calif., praised the study. However, he noted that the definition of anesthesia complications is wide, including minor problems such as snoring and coughs.

He said the study findings underscore the need to proceed very carefully with patients who were born prematurely, including adults. Anesthesiologists may want to use a less-risky anesthetic and adjust the doses so they're given more gradually, he said.

"If you are prewarned then you can prepare," Anand said, adding it's important for doctors and patients to discuss birth history. "This allows the anesthesiologist to design their anesthesia in a way that would minimize complications."

As for parents of premature children, Havidich said they can reduce the risk of anesthesia complications by not exposing their kids to tobacco smoke.

The study was published online Feb. 25 in the journal Pediatrics.

More information: For more about the risks of anesthesia in children, visit the <u>Society for Pediatric Anesthesia</u>.



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