



Anesthesia

What to know before you have surgery



If you need to undergo surgery, you will first have an appointment at the outpatient clinic. The anesthesiologist will take you through the course of events of the operation. The purpose of your visit is to determine your state of health, the surgical risks and the most suitable anesthesia technique. You will find more information here.

Anesthesia

With every surgery comes anesthesia. Thanks to the improved monitoring equipment, the availability of modern medication and the proper training of anesthesiologists and their staff, anesthesia today is very safe.

There are different forms of anesthesia:

- general anesthesia
- regional anesthesia
- local anesthesia

General anesthesia

With general anesthesia, you will go into a sleeplike state. This form of anesthesia is also referred to as narcosis.

Side effects

After a general anesthesia, you may experience nausea, vomiting, sore throat and hoarseness. There is no need for concern. These complaints usually disappear after a day or two. Furthermore, you may feel under the weather, drowsy or sleepy for a few days.

Complications

Despite all due care, complications cannot always be prevented. There may be allergic reactions to medication. Inserting the breathing tube can damage your lip or, in exceptional cases, your teeth. Sometimes patients have temporary urinary problems. An unfortunate lying position during the operation may trap a nerve in the arm or leg causing a tingling feeling and loss of strength. Except in the event of calamities, the occurrence of a serious complication due to the anesthesia will be associated with the state of your health prior to the operation. Discuss with your anesthesiologist whether the anesthesia presents any special risks in your case.

Regional anesthesia

Regional anesthesia makes a specific part of the body numb. Generally this is done by means of a spinal puncture (epidural/spinal).

Side effects

Post-operation urination can be temporarily difficult. Furthermore, you might experience headaches, which usually disappear with the help of painkillers, extra moisture and by lying down. Sometimes temporary back pain may occur. Nausea occurs from time to time.

Complications

In very rare cases tingling or nerve damage may occur.



Regional anesthesia of the arm

Another possibility is anesthetizing an arm via an injection in the armpit or via an infusion needle.

Side effects

When you receive a local anesthetic in your arm, the feeling and control of the arm may be reduced during the first day. It is important to wear a sling or support the arm. Try not to lie on the arm at night.

Complications

In very rare cases tingling may occur for some time after surgery or there may even be nerve damage. In some cases, regional anesthesia may prove not be sufficiently effective. In that case, you will be given narcosis.

Local anesthesia

If you are given local anesthesia, the area of the body that will be operated on is anesthetized by means of injections (for example in eye surgery).

Preparing for the operation

No eating or drinking after midnight

On the day before the operation, you must not eat anything after midnight. A sip of water to take medication is permitted. If your operation is later in the day, you are sometimes allowed to drink clear drinks such as water, tea and lemonade up to two hours before the time of the operation. If you are to undergo surgery in the afternoon, the anesthesiologist may decide that you can have a light breakfast.

Medication

When you come to the hospital for your appointment at the outpatient clinic, please bring all the medication you are using with you.

The anesthesiologist will discuss with you what medication to take on the day of the operation. If you are taking blood thinning medications (including Ascal, Aspirin, Sintrom, as well as certain painkillers), you should always tell the anesthesiologist. Sometimes on the evening before the operation or on the day of the operation itself, the anesthesiologist will arrange for you to take medication, for example if you are very nervous.

Smoking

Of course it is better not to smoke at all, but in the hours before the operation you should certainly not do so. Smokers have irritated airways. It is thus more difficult to control the breathing of a smoker. Be aware also that coughing is very bothersome after the operation.

Going home

If you are allowed to go home on the same day as the operation, make sure that you are accompanied by an adult and that you won't be at home alone. Arrange transportation by taxi or private vehicle, but do not drive yourself!



The operation

Arrival at surgical complex

In the ward you will usually have to put on a gown and you will need to leave your dentures and glasses behind. Before entering the operating room, you will be moved temporarily to a waiting area. If the previous operation takes longer than expected, it may be some time before you are actually taken to the operating room.

Arrival at operating room

In the operating room you will meet the anesthesiologist responsible for the anesthesia during the operation. He or she will administer the anesthesia. This might be a different anesthesiologist than the person who saw you at the outpatient clinic. You will always be given a drip before the operation. You will also be connected to a monitor that monitors, among other things, your heart rate, blood pressure and the oxygen level in your blood.

During the operation

The anesthesia team will monitor you throughout the operation. During the operation, it may be necessary to place a tube in your bladder or your stomach. This will still be there after the operation. You may also need blood during or after the operation. Should you have any fundamental objections to receiving blood, please make sure you mention this during the pre-operative consultation at the outpatient clinic.

After the operation

After the operation, you will first go to the recovery room. The anesthesiologist will assess when you can return to your own nursing ward, to the PACU (Post Anesthesia Care Unit) or to the ICU (Intensive Care Unit).

Pain relief

The anesthesiologist will arrange sufficient pain medication for you after the operation. This medication can come as suppositories, tablets and/or injections. You may be given a pain pump, allowing you to control the pain medication yourself. In some occasions a tube will be inserted in the back (epidural catheter) via which a pain relieving analgesic is continually administered. After the operation, the anesthesiologist can see you at your request.

At home

We strongly recommend you take things easy at home during the first 24 hours after the operation. Do not operate any machinery, do not make important decisions. Eat and drink food and drinks that are easily digestible. It is not uncommon to feel unfit for a while after surgery. This is not only anesthesia-related, the stressfulness of the operation also takes a toll. It takes time for the body to recover.



Health changes

In the period between your visit to the anesthesiologist and the day of the operation, there may be changes in your health situation. You may have had new complaints or have started taking new or different medication. You may also now be treated by a different specialist. Should there be changes in your health, it is important to notify Erasmus MC's anesthesiology outpatient clinic. If you have any questions, please call the number below.

Contact

Anesthesiology outpatient clinic of Erasmus MC , telephone number: (010) 704 01 02.

You can reach us from Monday until Friday from 8.30 to 9.00 a.m.

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