In Reply:

We thank Drs. Woehlck and El-Orbany for their interest in our recently published article that examined lipid emulsion in the setting of cardiac arrest induced by bupivacaine. They letter raises several important issues. In the Discussion section of our article, we explained some of the major differences between the various animal models that have been used to evaluate lipid treatment for local anesthetic toxicity.

We recognize the potential drug interactions between the anesthetics agents and the experimental protocol. The anesthetic agents, such as xylazine, ketamine, and α-chloralose, were chosen to preserve hemodynamic and electrophysiologic stability at the doses used in our study. Propofol was avoided because of the confounding effect of lipid pretreatment, as found in other animal studies of this nature. Despite this limitation, we were able to achieve a stable hemodynamic profile in all animals before the induction of cardiac arrest. One of their letter raises several important issues. In the Discussion section of our article, we explained some of the major differences between the various animal models that have been used to evaluate lipid treatment for local anesthetic toxicity.

We agree with Drs. Woehlck and El-Orbany that it would be useful to consider further experiments that expand our understanding of the potential therapeutic benefits of lipid emulsion in the setting of cardiac arrest induced by toxic doses of local anesthetic, especially at a time when various national and international organizations are in the process of developing recommendations incorporating lipid treatment.

**References**