Asymptomatic Smokers: ASA I or II?

To the Editor—Most anesthesiologists favor an ASA I classification for asymptomatic smokers and argue that smoking is not a disease; those opposed argue that even asymptomatic smokers have significant pathophysiologic changes and increased perioperative morbidity. I believe there is sufficient evidence to support the latter position and we as anesthesiologists should come to a consensus on this risk classification.

The ASA Physical Status Classification defines class II as a “Mild to moderate systemic disturbance.” Examples of ASA class II include essential hypertension (which often is asymptomatic). Asymptomatic smokers have been found to have statistically significant increases in closing volumes consistent with small airway disease. Asymptomatic smokers also have been shown to have abnormalities in mucociliary transport.

Increased postoperative morbidity in patients smoking greater than 10 cigarettes a day has been known for some time. Few studies look specifically at complications in asymptomatic smokers. One such study found non-bronchitic smokers to have a 53 per cent incidence of chest complications vs. a 23 per cent incidence in non-smokers.

The evidence points to both quantifiable disease and increased perioperative risk in even the asymptomatic smoker. Surely this deserves a classification of a mild to moderate systemic disturbance.

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REFERENCES


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