A-147  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Propranolol Kinetics in Patients Submitted to Cardiac Surgery with Cardiopulmonary Bypass  
Jose Otavio C. Auler Jr., MD; Patrick S. de Medeiros, MD;  
Eduardo B. da Costa, MD; Antonio L. P. C. de Mello, MD;  
Dina B. D. de Mello, MD; Mário C. C. Prates, MD.  
University of Sao Paulo, Sao Paulo, Brazil.  
Propranolol plasma levels and pharmacokinetics (PK) may be altered by cardiopulmonary bypass (CPB).

A-148  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Inter- and Intraindividual Variability of Cardiac Output in Surgical Patients  
Fredrik Boer, MD PhD; Jette A. Kuipers, MD PhD;  
Sanne M. Arboos, MD PhD; Anton G.L. Burn, PhD; James G. Bozil, MD PhD.  
Anesthesiology, Leiden University Medical Center, Leiden, Netherlands.  
A predictive model of cardiac output based on demographic parameters of surgical patients explained 44% of the variability of the measured cardiac output.

A-149  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Does the Administration of Thoracic Epidural Lidocaine Affect Oxygenation during Anesthesia for One-Lung Ventilation (OLV) in Patients Undergoing Thoracic Surgery?  
J.H. Campos, MD; T.J. Brennan, MD; C.F. Massa, MD; K.H. Kornstine, MD.  
Anesthesiology, University of Iowa Hospitals & Clinics, Iowa City, IA, United States.  
Epidural lidocaine can be used during anesthesia and OLV without impairing oxygenation.

A-150  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Recovery of Thalamic and Cortical Evoked Potentials after Hypothermic Circulatory Arrest with Retrograde Cerebral Perfusion  
Albert T. Cheung, MD; Stuart J. Weiss, MD PhD;  
Glen Kent, BS; Joseph E. Bavaria, MD; Mark M. Stecker, MD PhD.  
Anesthesiology, Univ of Penn, Philadelphia, PA, United States.  
The delay in recovery of cortical SEPs after DHCA was reduced by RCP, but still proportional to the duration of DHCA.

A-151  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Perfluorocarbon Emulsions Increases the Blood Solubility of Volatile Anesthetics in Vitro  
Olivier Y. Caignet, MD; Luc J. Vanobbergh, MD PhD;  
Philippe L. Baele, MD.  
Centre de Medecine Critique, Hopital Militaire, Brussels, Belgium.  
Clinical doses of Perfluorocarbons in blood increase the solubility of modern volatile anesthetics, which may influence the level of anesthesia.

A-152  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
The Effects of Halothane, Sevoflurane, and Propofol on Left Ventricular Diastolic Function in Healthy Subjects  
Miodrag Filipovic, MD; Manfred D. Seeberger, MD;  
Patrick Hunziker, MD; Karl Skarvan, MD.  
Department of Anesthesiology and Division of Cardiology, University of Basel/Kantonsspital, Basel, Switzerland.  
Propofol, halothane, and sevoflurane have differential effects on LV diastolic function.

A-153  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Fenoldopam Preserves Renal Function after Aortic Cross-Clamping  
Timothy B. Gilbert, MD; Jawad U. Hassanain, MD;  
William R. Finn, MD.  
Anesthesiology, University of Maryland, Baltimore, MD, United States.  
22 patients for major vascular repairs received fenoldopam as a renal protectant. Shown by serial creatinine clearances, fenoldopam preserved renal function with return of baseline values within 24 hours.

A-154  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Effect of Olprinone and Milrinone on Cerebral Blood Flow in Patients Following Cardiac Surgery  
Koji Goto, MD; Shigeru Yoh, MD; Koji Ito, MD; Akio Mizutani, MD; Takanori Naguchi, MD.  
Department of Anesthesiology, Osaka Medical University, Osaka, Osaka, Japan.  
PDE III inhibitor led to increase in cerebral blood flow. Olprinone demonstrated more remarkable cerebral vasodilatory action than milrinone.

A-155  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Baroreflex Sensitivity and Autonomic Activity in Perioperative Period: Effect of Age  
P. Gratadour, MD; V. Meyrieux-Peyrou, MD; A. Cividjian, Misc; G. Viale, MD;  
L. Quintin, MD PhD.  
Department of Anesthesiology, Hop. E. Herriot, Lyon, France.  
Upon the first 24h after anesthesia, young patients experienced increase in vagal tone with a decrease in low frequency components of heart variability in contrast of the elderly.

A-156  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Intracavitary Contrast Intensity Following Transpulmonary Transmission of a Second-Generation Agent at Normal and Reduced Contractility  
C.A. Greten, MD; J.A. Broschart, MD; K.W. Lorenz, MD; H. Thiel, MD;  
N. Roewer, MD, Anesthesiology, University Hospital, Wuerzburg, Germany.  
cyclic changes in intracavitary echodensity of a contrast agent reflected changes in LV isovolumetric contraction.

A-157  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Effects of Fenoldopam on Renal Function Following Cardiac Surgery  
Michele Halpenny, FFARCSI; Stiniavan Lakshmi, FRCR;  
Aonghus O’Donnell, FFARCSI; Sheila O’Callaghan-Enright, FFARCSI;  
George O. Shorten, MD, Anesthesia, Cork University Hospital, Cork, Ireland.

A-158  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Autonomic Responses to Thermal Stressors during Dexmedetomidine Versus Placebo Infusions in Volunteers  
Charles W. Hogue, MD; Pekka Talke, MD;  
Daniel J. Sessler, MD; Charles A. Richardson, PhD, Anesthesiology, Washington University School of Medicine, St. Louis, MO, United States.  
These data suggest that dexmedetomidine differentially affects cardiac and systemic sympathetic responses to shivering.

A-159  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
Measuring Relative Circulating Blood Volume: Use of a Hemoglobin-Based Oxygen Carrier (HBOC) in a Rabbit Model  
J.S. Jabr, MD; F. Lurie, MD; Ph.D.; S. Xi; O.A. Kuznetsova, MD; B. Driesen, D.V.M.; Ph.D, Anesthesiology, University of California, Davis, Sacramento, CA.  
Circulating plasma and blood volumes can efficiently estimate the plasma hemoglobin concentration after HBOC infusion.

A-160  Room B, 10/17/2000 9:00 AM - 11:00 AM (PS)
(S+)Ketamine Increases Muscle Sympathetic Activity and Maintains the Sympathetic Response to Hypotensive Challenges  
P. Kienbaum, MD; Th. Heuter; G. Patlakovics, MD PhD; M.C. Michèl, MD;  
J. Peters, MD, Abt. f. Anästhesiologie & Intensivmedizin, Universitätsklinikum, Essen, Germany.  
(S+)ketamine increases muscle sympathetic activity and maintains its response to hypotensive challenges.