A-274  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
Perfusion-MRI & Cerebral Blood Flow Changes after CABG  
Thomas F. Floyd, MD; Michael A. Acker, MD; Timothy J. Gardner, MD; Bruce K. Rosengard, MD; John A. Detre, MD, Anesthesia, Unit of Pennsylvania, Philadelphia, PA, United States. Perfusion-MRI generated brain perfusion maps before and 1 week after CABG. Global CBF increased by 70% (p < .05) after CABG and correlated (r = .53) with fall in hematocrit.

A-275  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
Contribution of Transcranial Doppler Sonography in the Management of Subacute Post-Subarachnoid Hemorrhage Hydrocephalus  
Thierry S. Gillart, MD; Jean E. Bazin, MD, PhD; Jean J. Lemaire, MD, PhD; Dominique Guelon, MD; Pierre Schoeffer, MD, Department of Anesthesia, CHRU, Clermont-Ferrand, France. Transcranial Doppler Sonography evaluates CSF pressure and improves lumbar puncture rhythm

A-276  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
Validation of a New Multiparameter Sensor Measuring Brain Tissue Oxygenation Using Positron Emission Tomography Arum K. Gupta, MBBS, MRCP; Peter J. Hutchinson, Tim Fryer, Wolfson BrainImaging Team, PhD, FRCA; David K. Monon, Anesthesia and NeuroCritical Care, Addenbrooke's Hospital, Cambridge, England, United Kingdom. Changes in PBO2 correlate with changes in Pvo2.

A-277  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
Spinal Cord Monitoring during Thoracic Neurosurgical Procedures H. Kim, MD; D.C. Adams, MD; D.J. Weitz, PhD; B.Y. Yang, PhD; N.L. Perin, MD, Anesthesiology and Neurosurgery, The Mt. Sinai Medical Center, New York, NY, United States. This study demonstrates the feasibility of motor and sensory monitoring during thoracic spine procedures. Intraoperative conditions were optimized by controlled neuromuscular blockade.

A-278  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
Effect of Remifentanil on Hemodynamics and Seizure Duration during Electroconvulsive Therapy (ECT) Anthony L. Korac, MD; Thomas Hall, MD, Anesthesiology & Psychiatry, University of Kansas Medical Center, Kansas City, KS, United States. The addition of remifentanil to decreasing doses of methohexitol allowed for an increase in seizure duration but no resulting change in hemodynamics.

A-279  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
Is There an Anesthetic Dependent Difference in Brain Blood Flow and Electroencephalography in Patients with Intracranial Vascular Pathology? Kathryn K. Lau, M.D.; William S. Schmeling, M.D.,Ph.D.; Tom Davis, Anesthesiology, Medical College of Wisconsin, Milwaukee, WI, United States. This study compares VMCA and EEG between 3 inhalation agents in patients with intracranial vascular pathology.

A-280  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
The Efficacy of Electroencephalography and Somatosensory Evoked Potential Monitoring in Detecting Cerebral Ischemia during Carotid Endarterectomy under Regional Anesthesia Jeong-Gill Leem, M.D.; Yoon Choi, M.D.; Jung-Rak Lee, M.D.; Dong-Myung Lee, M.D., Department of Anesthesiology, Asan Medical Center, Songpa-gu, Seoul, Korea. Carotid surgery, monitoring cerebral ischemia.

A-281  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
The Impact of Mobile Intraoperative MRI on Anesthetic Care Robert A. MacTaggart-Conan, MD; Richard Falkenstein, MD; David P. Archer, MD; Carsta J. Wallace, MD; Garinette R. Sutherland, MD, University of Calgary, Calgary, AB, Canada. The use of mobile high-field intraoperative MRI increases the duration of craniotomies by 88 minutes, without any effect on the rate of recovery from anesthesia.

A-282  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
Does Pyridostigmine Bromide (PB) Have Central Effects? O. Naboni-Stick, MD; A. Gigi, MSc; B. Bruk, MSc; E. Goshen, MD; I. Probovnik, PhD, Chaim Sheba Medical Center, Tel-Hashomer, Israel. A prospective preliminary study to explore possible central effect of PB. Mean velocity by TCD increased and results in Digit to Symbol test improved after repeated PB intake. Further study is needed.

A-283  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
Transcranial Doppler Sonography and Cerebrovascular CO2-Reactivity during Whole Body Hypothermia A. Nierhaus, MD; C. Meissner, S. Hegewisch, A. Moyer; J. Schulte am Esch, MD, Anesthesiology, University Hospital Eppendorf, Hamburg, Germany. Cerebral blood flow velocity increased profoundly. CO2-reactivity was preserved. Hyperventilation only slightly decreased Vm during WBH.

A-284  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
Remifentanil Facilitates Control of Bispectral Index by Sevoflurane Erik Olofson, MSc; Michael Frank, MD; Albert Daban, MD, PhD, Department of Anesthesiology, Leiden University Medical Center, Leiden, Netherlands. Remifentanil decreases sevoflurane concentration-bispectral index equilibration halftime and variability in BIS. This indicates the possibility of faster and more stable control of BIS.

A-285  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
Comparison of the Concentration-Dependent Effect of Sevoflurane on the Spinal H-Reflex and the EEG in Humans Bemno Robberg, MD; Reinhard Rueschmer, MD; Joerg Schneider; Andreas Hoeft, MD, PhD, Dept. of Anesthesia, Univ. of Bonn, Bonn, Germany. Different t1/2,Ko2 values for H-Reflex and EEG point to distinct interactions on spinal and cerebral levels.

A-286  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
Somatosensory Evoked Potentials vs Stump Pressure Correlation with Induced Hypotension during Temporary Endovascular Carotid Clamping Musa Sesay, MD; Pierre Arne, MD; Jerome Berge, MD; Pierre Mauvette, MD, DARS, Pellegrin, Bordeaux, France. Somatosensory potentials are more accurate than stump pressure in assessing collateral reserve during endovascular carotid clamping.

A-287  Room E, 10/16/2000 9:00 AM - 11:00 AM  (PS)  
Anesthetic Considerations for H-reflex Monitoring during Surgical Treatment of Spastic Disorders Velislav Slavov, MD; Jean-Pascal Lefaucheur, MD; Philippe Decq, MD; Paul Filippetti, MD; Philippe Davaldestin, MD, Dept of Anesthesiology, Henri Mondor University Hospital, Creteil, France

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