论著

## 丙泊酚靶浓度对开颅术中唤醒时间的影响

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目的 研究开颅术中唤醒时丙泊酚靶浓度对唤醒时间和不良事件发生率的影响。 方法 62例拟行大脑 半球择期手术的患者在常规诱导后行经鼻气管内插管,然后随机将患者分为4组,其丙泊酚靶浓度分别设 置为3.5、4.0、4.5和5.0µq/mL。所有患者诱导后不再使用其他镇痛药和麻醉药,只通过调整丙泊酚靶 浓度来保证手术顺利进行,记录并比较各组患者(唤醒前丙泊酚靶浓度为5组: 3.5、4.0、4.5、5.0和 >5.0μg/mL)的唤醒时间和开颅期间的不良事件发生率。 结果 唤醒前丙泊酚靶浓度为3.5μg/mL组 患者的唤醒时间与4µg/mL组的无显著性差异,但是较其他2组唤醒时间短(P < 0.05)。对开颅期间不良 事件发生率的分析显示,诱导后丙泊酚靶浓度为3.5µg/mL组患者的不良事件发生率明显高于其他3组。 结论 在开颅术中唤醒时,丙泊酚靶浓度能够明显影响患者的唤醒时间和开颅期间的不良事件发生率,在 诱导后将丙泊酚靶浓度维持在4µq/mL是比较适宜的,既能使患者迅速被唤醒,又能使开颅期间的不良事 件发生率比较低。

关键词 开颅手术;唤醒试验;丙泊酚;靶控输注 分类号

# Awake craniotomy: effects of target concentration of propofol infusion on awake time and adverse events

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#### Abstract

Objective To study the effects of different target concentration of propofol infusion on awake time and adverse events. Methods Sixty-two patients undergoing craniotomy were randomly assigned to four groups in which the propofol target concentration was set at 3.5, 4.0, 4.5 and 5.0µg/mL respectively after induction, and no more anesthetics were given besides increasing the concentration of propofol. So when the patients were asked to be waked up, the patients had been divided into 5 groups: 3.5,4.0,4.5,5.0 and >5.0µg/mL. Awake time and adverse events were recorded. Results Awake time of the patients in the 3.5µg/mL and 4.0µg/mL groups was significantly shorter than that in other groups. However, adverse events of the patients in the 3.5µg/mL group were significantly much more than those in other groups. Conclusions: Propofol target concentration has significant effects on awake time and adverse events, and 4µg/mL is a suitable propofol target concentration after induction.

Key words <u>awake craniotomy propofol</u> target controlled infusion

### DOI:

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