



VŠEOBECNÁ FAKULTNÍ
NEMOCNICE V PRAZE



1. LÉKAŘSKÁ
FAKULTA
Univerzita Karlova

 **KARIM**
1.LF UK A VFN V PRAZE

Predikce DAM, algoritmy, videolaryngoskopie

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Obtížná intubace

- Incidence obtížné OTI:
 - Na OS: 5-10 %
 - Na JIP+UP: **až 27 %**
- Selhání OTI: 0,15-0,6 %

[Cochrane Database Syst Rev](#). 2018; 2018(5): CD008874.

Published online 2018 May 15. doi: [10.1002/14651858.CD008874.pub2](#)

PMCID: PMC6404686

PMID: [29761867](#)

Airway physical examination tests for detection of difficult airway management in apparently normal adult patients

Monitoring Editor: [Dominik Roth](#), [Nathan L Pace](#), [Anna Lee](#), [Karen Hovhannisyan](#), [Alexandra-Maria Warenits](#), [Jasmin Arrich](#), [Harald Herkner](#),[✉] and Cochrane Anaesthesia Group

> [Anaesth Intensive Care](#). 2012 Jan;40(1):120-7. doi: 10.1177/0310057X1204000113.

Incidence of difficult intubation in intensive care patients: analysis of contributing factors

Jan F Heuer¹, Thomas A Barwing, Juergen Barwing, Sebastian G Russo, Elisa Bleckmann, Michael Quintel, Onnen Moerer

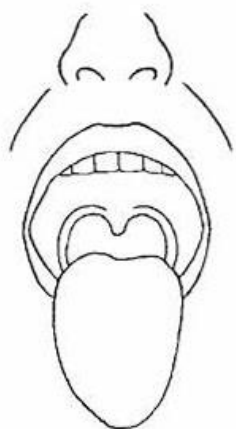


Predikce, skórování

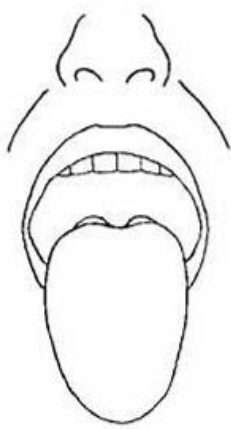




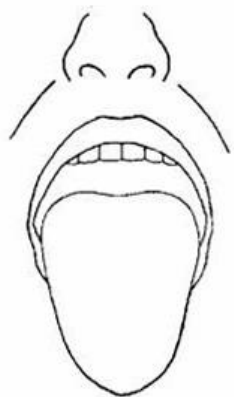
Predikce, skórování - Mallampati



CLASS I



CLASS II



CLASS III



CLASS IV

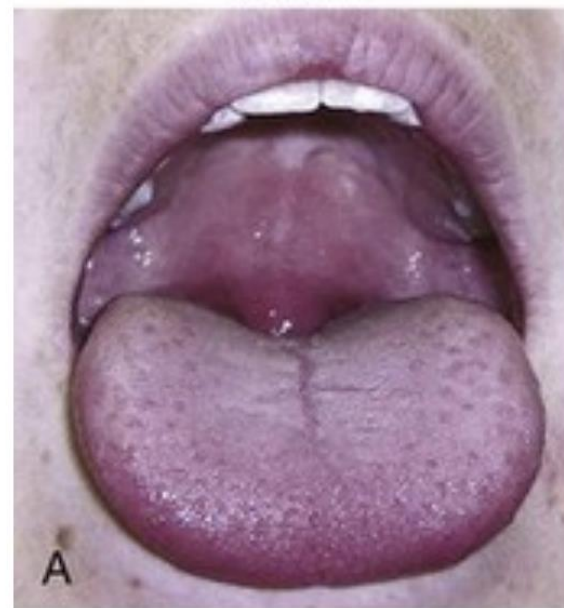
Class I



Class II



Class III

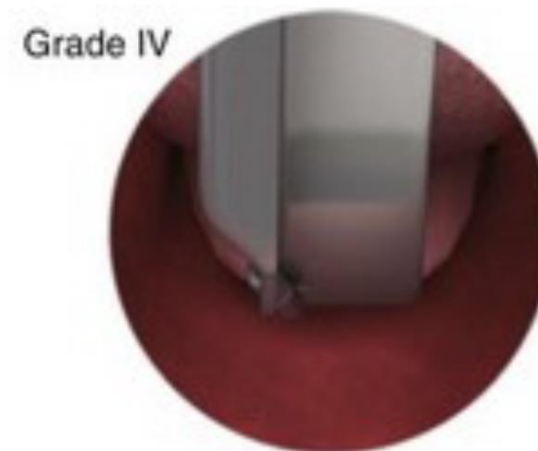
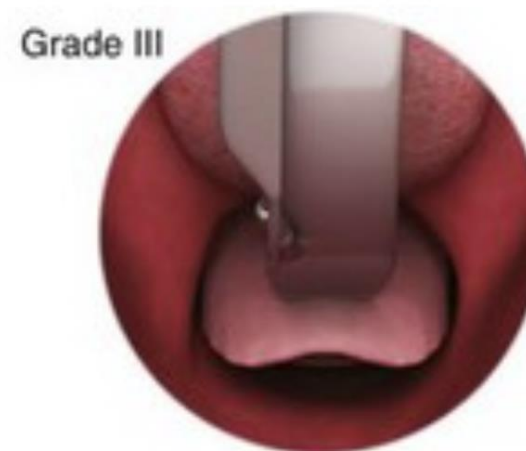
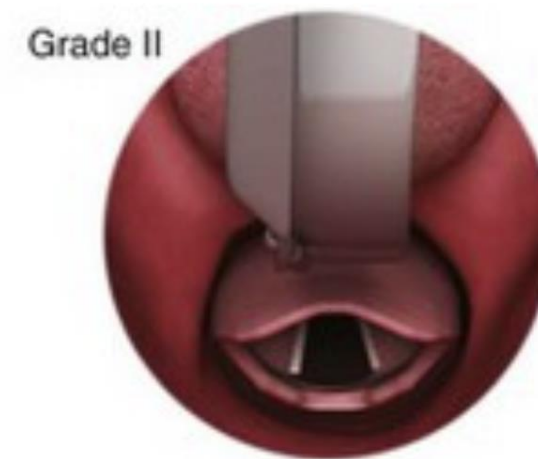
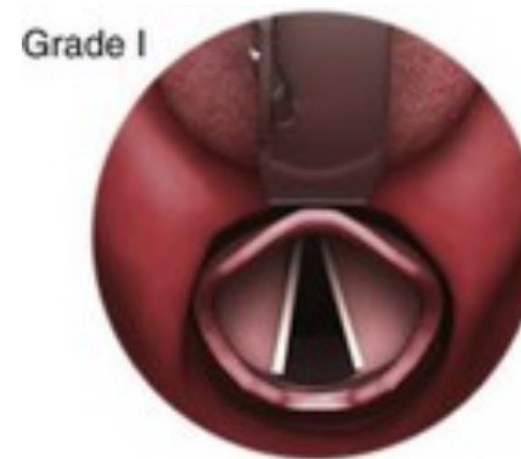
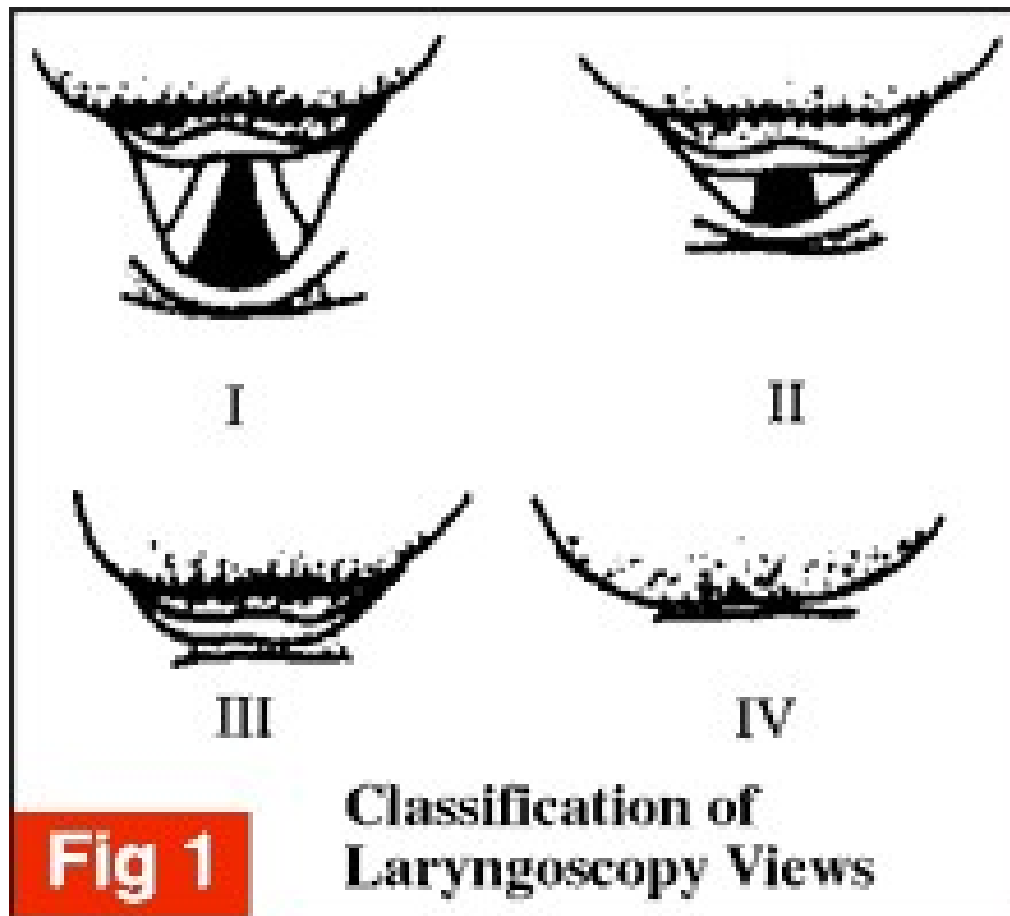


Class IV





Predikce, skórování - Cormack–Lehane skóre





Predikce, skórování - LEMON score

- **L - Look externally**
(úraz obličeje, velké řezáky, knír či plnovous, velikost jazyka)
- **E - Evaluation – pravidlo 3-3-2**
(vzdálenost mezi řezáky < 3 prsty, vzdálenost jazyka-brada < 3 prsty, thyroid-mouth distance < 2 prsty)
- **M - Mallampati – (skóre ≥ 3)**
- **O - Obstruction** (přítomnost jakéhokoli faktoru, který může způsobit obstrukci DC)
- **N - Neck mobility** (rozsah pohyblivosti krční páteře)



Predikce, skórování - MACOCHA

MACOCHA Score

MACOCHA Score				
Patient Factors	<u>M</u> allampati Class III/IV Airway	5	Pathology Factors	
	Obstructive Sleep <u>A</u> pnea	2		
	Decreased <u>C</u> -Spine Mobility	1	Operator Factors	
	<u>O</u> pening (≤3 cm)	1		
			<u>C</u> oma	1
			Severe <u>H</u> ypoxemia (SaO ₂ <80%)	1
			Non- <u>A</u> nesthesiologist	1



Predikce **není** spolehlivá

Mallampati 1 **≠** snadná OTI

=> **preoxygenace**

Table 2 Apnoea time required to reduce oxyhaemoglobin saturation (Sa_{O_2}) to 85 % for a standard adult, standard 10-kg infant and obese adult, both with and without preoxygenation

	Time (s) to $Sa_{O_2} = 0.85$	
	$FA_{O_2 initial} = 0.133$	$FA_{O_2 initial} = 0.87$
Standard adult (70 kg)	84	502
Standard infant (10 kg)	41	180
Obese adult (127 kg)	46	171



Preoxygenace

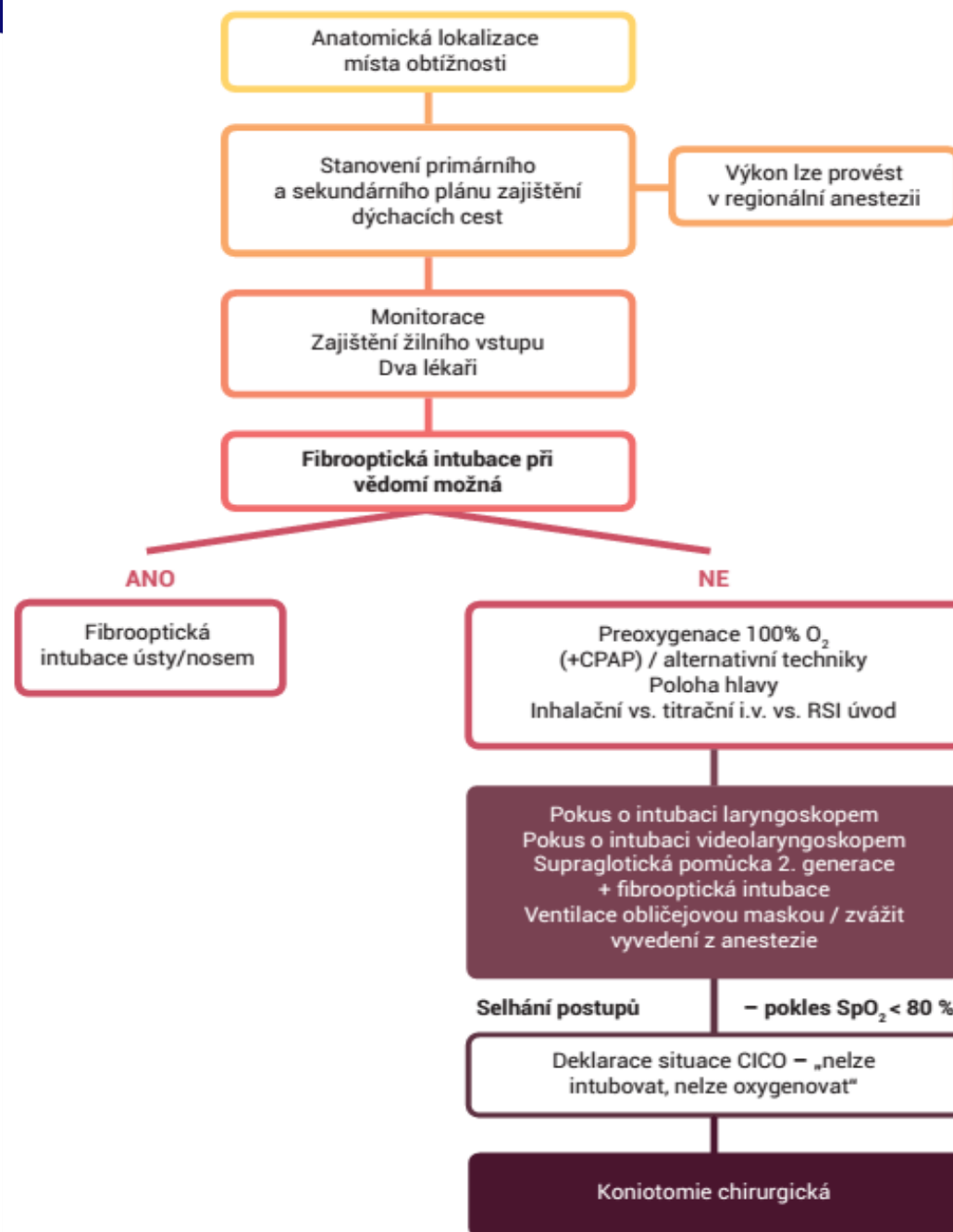
- varianty
 - 3 minuty dýchání s O₂ 10 l/min
 - 8 hlubokých vdechů během 1 minuty
 - **cílové etO₂ 90 %**
- Anti-Trendelenburgova poloha
- CPAP/NIV
- Apnoická oxygenace (airway/HFNO/brýle O₂)



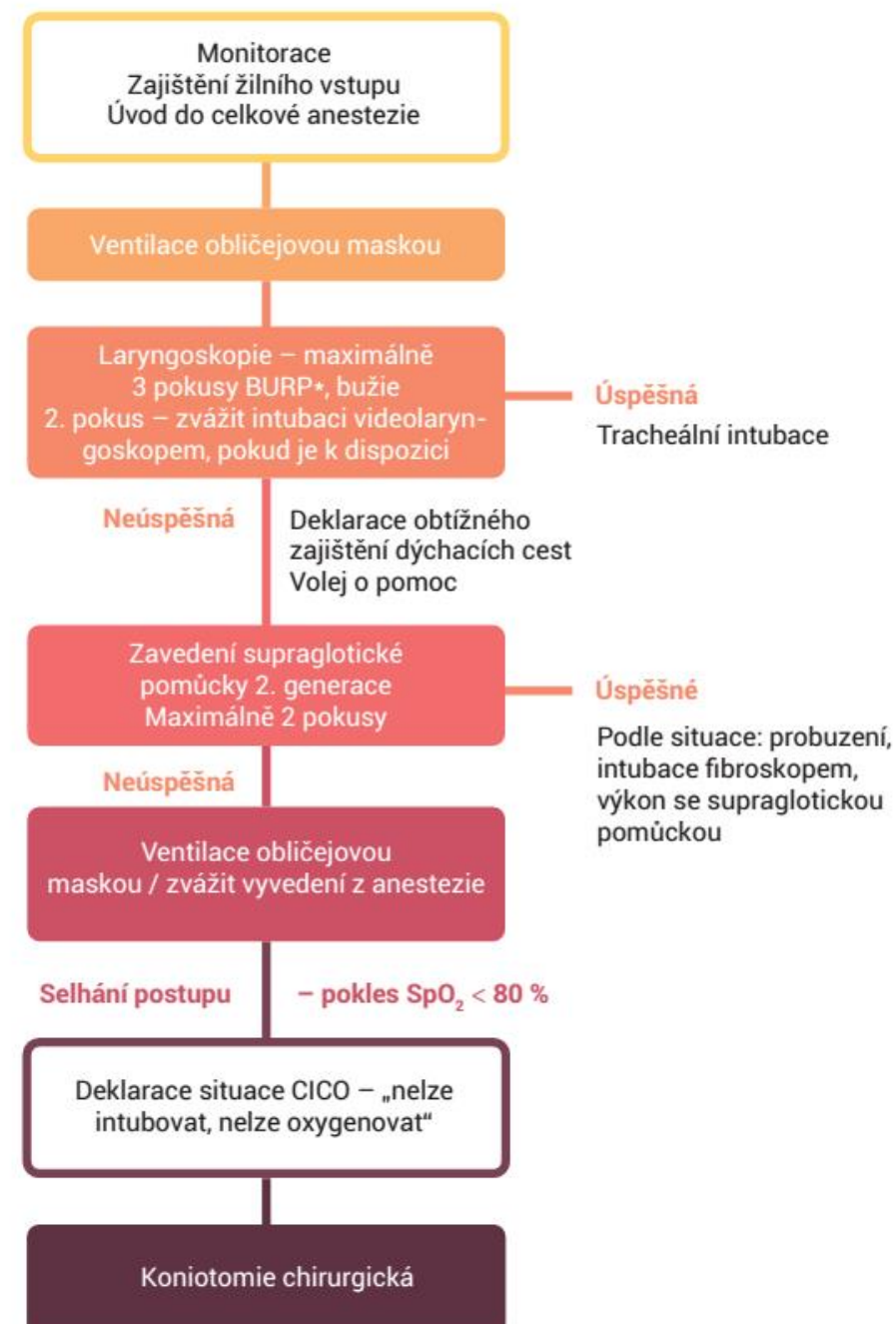


O
A

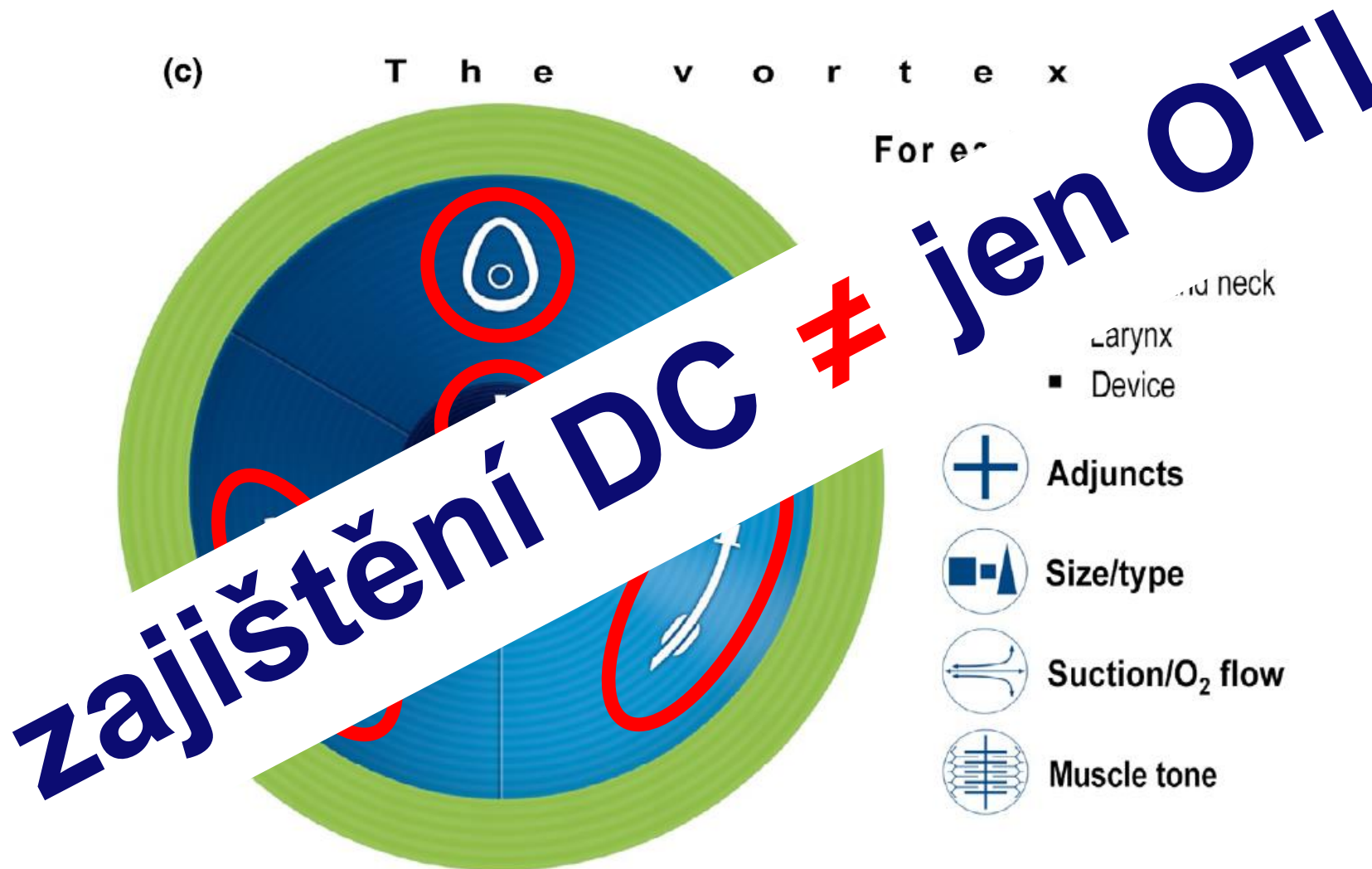
OČEKÁVANÉ OBTÍŽNÉ ZAJIŠTĚNÍ DÝCHACÍCH CEST U DOSPĚLÉHO PACIENTA



NEOČEKÁVANÉ OBTÍŽNÉ ZAJIŠTĚNÍ DÝCHACÍCH CEST U DOSPĚLÝCH



Jednoduše a rychle



Maximum three attempts at each lifeline (unless gamechanger)
at least one attempt should be by most experienced clinician

Cannot Intubate, Cannot Oxygenate status escalates with unsuccessful best effort at any lifeline or with unsuccessful attempts at any two consecutive lifelines



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Jak nemít obtížné zajištění DC

- **RAMP**, BURP, GUM bugie, VICE grip



BAD AIRWAY POSITIONING

(6'0" | 375 Lbs patient)

AIRWAY AXES MISALIGNED ON
HEAD CRADLE ONLY



GOOD AIRWAY POSITIONING

(same patient)

ON TROOP ELEVATION PILLOW + HEAD CRADLE
AIRWAY AXES BEGINNING TO ALIGN

Jak nemít obtížné zajištění DC

- RAMP, BURP, CUMMINS, VICE



Procedures

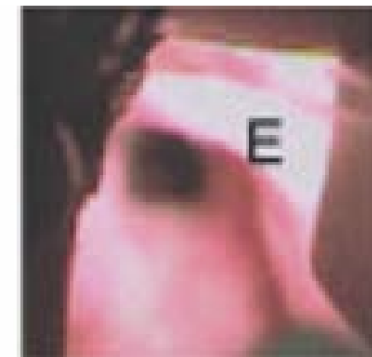
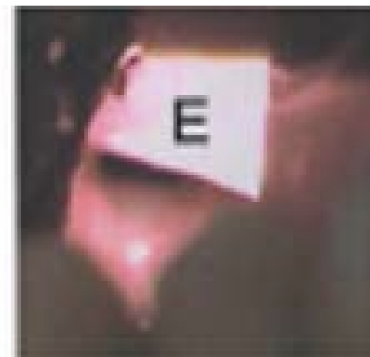
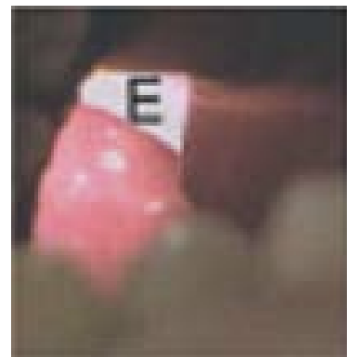
Direct
laryngoscopy

LD + mandibular
advancement

LD + BURP

LD + AM *BURP

Laryngeal vision



Cormack-Lehane

III
**

II

II

I
*

Backward Upward Rightward Pressure

Jak nemít obtížné zajištění DC

- RAMP, BURP, **GUM bugie**, VICE grip

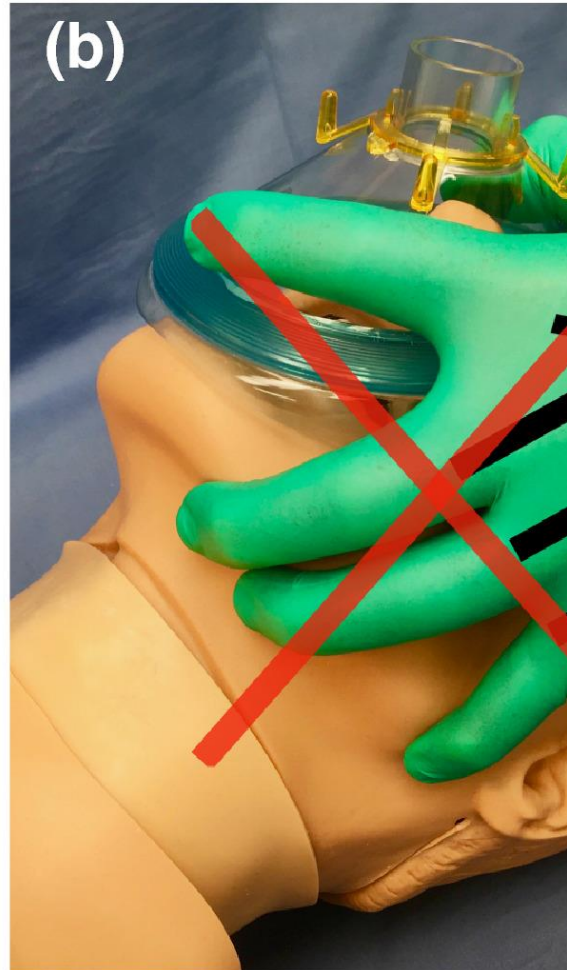
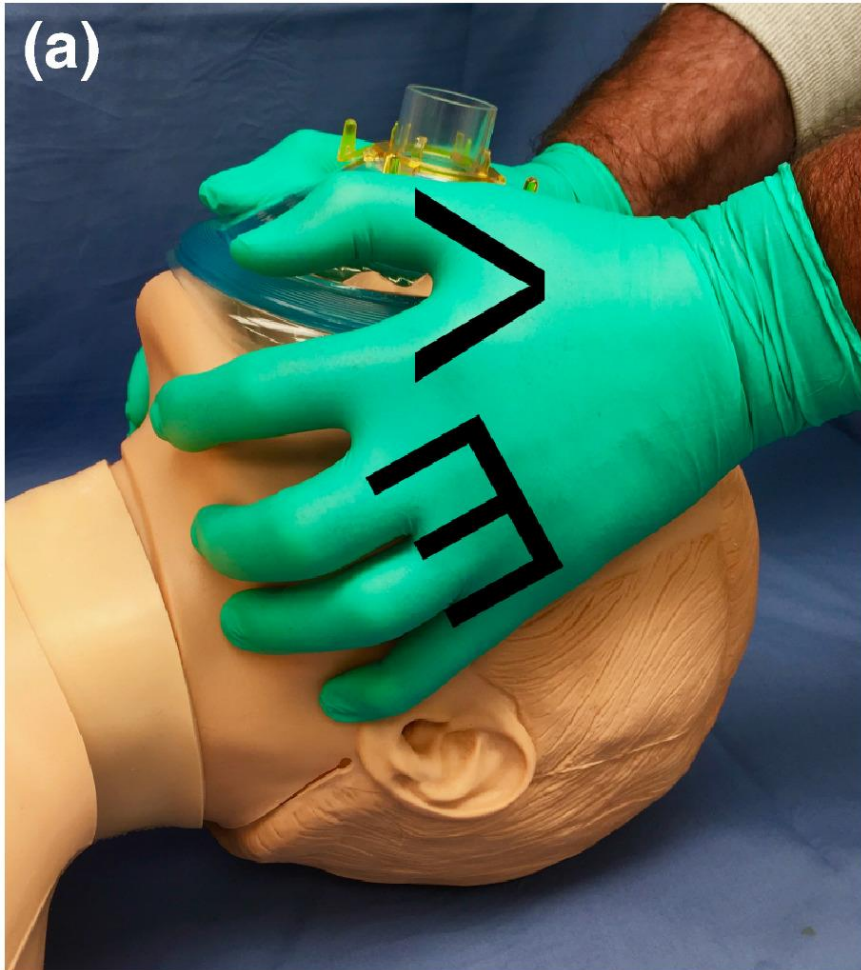
Základy úspěchu:

- Pozice Macintosh lžice ve vallecule
- Laryngeální tlak (BURP – technika sníží grade 3 z 9.2% na 1.6%)
(Takahata, 1997)
- Rotace ETT proti směru hodinových ručiček při zavádění. (Hinds a Michalek, 2007)
- Úspěšnost 94.3% i když nejsou hlasové vazy viditelné (grade 3)
(Hodzovic, 2003)



Jak nemít obtížné zajištění DC

- RAMP, BURP, GUM bugie, **VICE**



6 Cognitive aid: two-hand vice (V-E) grip



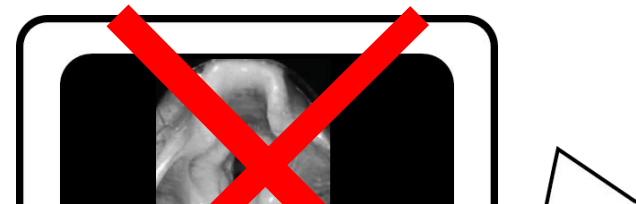
Intubace videolaryngoskopem

.... za roh! vždy se ZAVADĚČEM



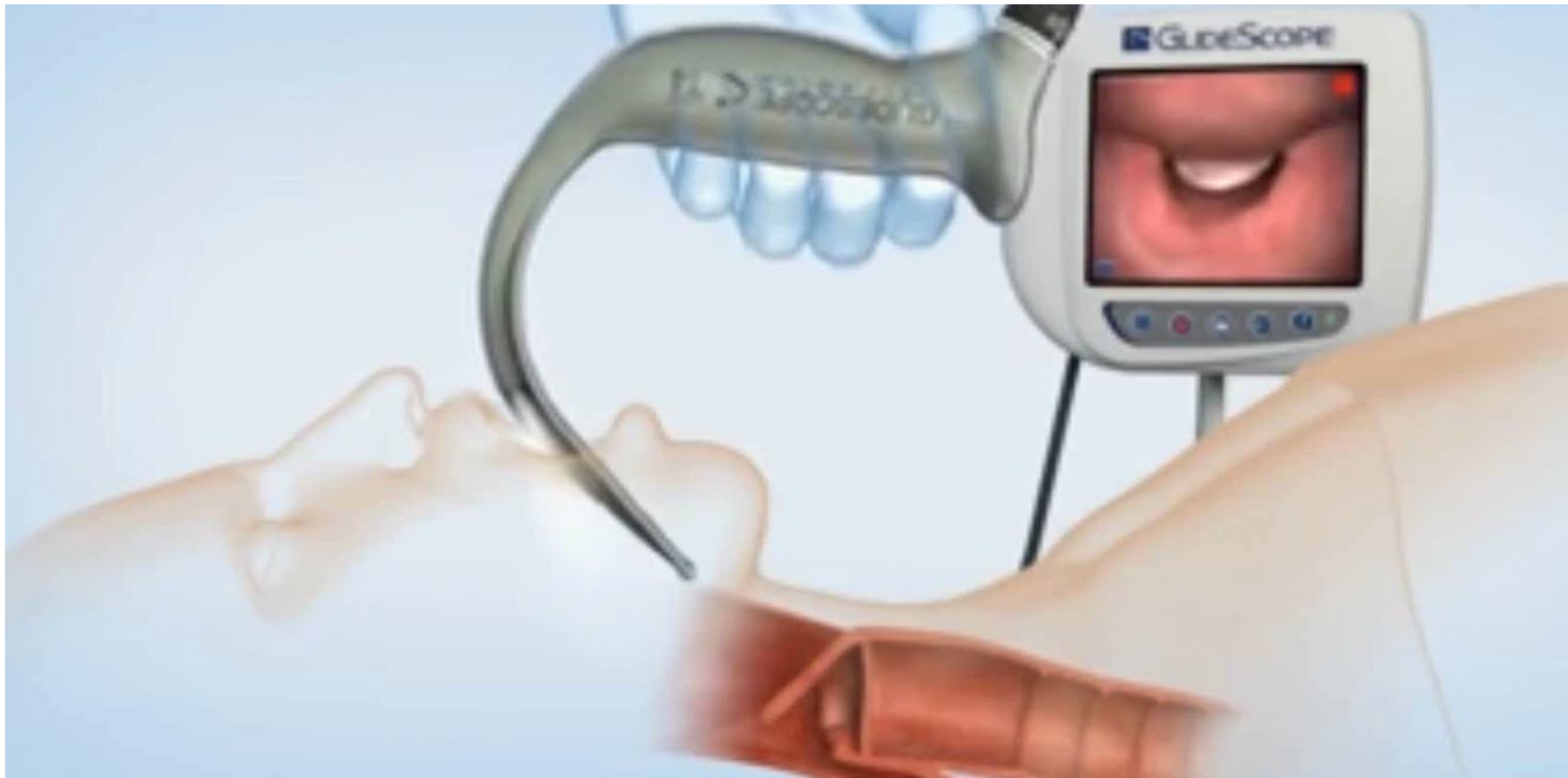


Jak na VLS?



- Neutrální poloha
- Zavádění středem
- Ne moc hluboko
- BURP
- Tah za čelist

CAVE: Vidět neznamená zaintubovat!







Závěr

- Obtížnou OTI **nelze vždy předpokládat**
- **Pomůcky, plán B**
- **Preoxygenace** dává čas navíc (**etO₂ 90 %**)
- Vidět neznamená zaintubovat
- **Zajištění DC $\neq$ jen OTI**

(c)

T h e v o r t e x



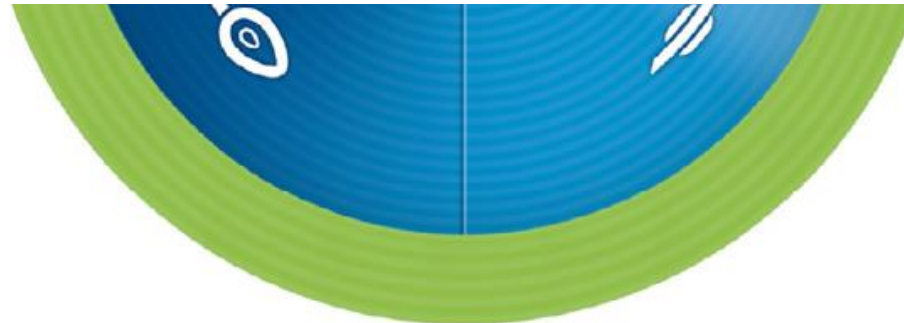
For each lifeline consider:



Manipulations:

- Head and neck
- Larynx
- Device

Děkuji za pozornost.



Suction/O₂ flow



Muscle tone

Maximum three attempts at each lifeline (unless gamechanger)

at least one attempt should be by most experienced clinician

Cannot Intubate, Cannot Oxygenate status escalates with unsuccessful best effort at any lifeline or with unsuccessful attempts at any two consecutive lifelines



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