Overview of Supraglottic Airways

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Simplified classification: Based upon sealing site
- Peri-laryngeal sealing
  - Simple – e.g. LMA, i-gel, iLMA
    - Extended e.g. LMA supreme
  - Directional e.g. ProSeal
- Base of tongue sealing
  - With oesophageal cuffs e.g. Combitube, LT, SLT.
  - Without oesophageal cuff e.g. CobraPLA™
  - SLIPA™

Aspiration protection mechanisms:
- **Obstruction**
  - Lower in oesophagus more effective than at entrance.
  - Inflatable more effective than fixed volume
  - Combitube, LTS > ProSeal, LMA > igel, SLIPA
- **Drainage**
  - Effectiveness is dependent upon effective obstruction mechanism
  - Combitube, LTS > ProSeal > igel
- **Storage**
  - Effectiveness dependent upon storage capacity – independent of obstruction effect
  - SLIPA™ > Combitube, LTS > ProSeal, LMA, igel

Access to the trachea

<table>
<thead>
<tr>
<th>Good</th>
<th>Fairly good</th>
<th>Poor</th>
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</thead>
<tbody>
<tr>
<td>iLMA</td>
<td>ProSeal</td>
<td>Combitube</td>
</tr>
<tr>
<td>Air Q</td>
<td>LMA supreme</td>
<td>LT, LTS</td>
</tr>
<tr>
<td>LMA, igel</td>
<td>Cobra</td>
<td>SLIPA™</td>
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</tbody>
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Strategy to achieve adequate ventilation when there is limited seal pressure
- Pressure support ventilation
- Pressure controlled ventilation
- Choice of optimal I:E ratio is 1:1