

Core Topics in Paediatric Anaesthesia

**Second Edition** 



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## **Second Edition**

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# **Preface**

Children comprise almost a quarter of the population, and many will require general anaesthesia for surgery or an investigative procedure. It is important that the facilities and environment for such procedures are appropriate for children, and those administering anaesthesia are knowledgeable, competent and reliable. It is an oft-repeated adage that the child is not a miniature adult, and nowhere is this truer than in paediatric anaesthesia, where there are significant differences, for instance, in pharmacology, psychology, common clinical conditions and legal issues such as consent. Our intention with this book has been to provide the core knowledge necessary to assist all those involved in anaesthetising children to do so safely and competently. We hope that this text will be particularly useful to trainees aspiring to become specialist paediatric anaesthetists.

We have tried to go further than just covering the core curriculum for training in paediatric anaesthesia. For the clinical chapters, we asked our authors, who are all recognised experts in their specialist areas, to share their experience by outlining in a succinct manner how they manage their patients. It seems to us particularly helpful to read how those who are regularly anaesthetising patients with specific disorders have fine-tuned their practice to minimise problems and achieve good outcomes. We have included additional reading for all chapters. Although we have discussed some of the more common syndromes affecting children, we have not provided a comprehensive

list of all the congenital disorders that may be encountered. Many of these are rare, and their salient features can quickly and easily be obtained on the Internet.

We hope that our book will also be useful for anaesthetists who work in the general hospital, especially those who only see children presenting as emergencies. Over the past 20 years or so, a plethora of reports have espoused the benefits of centralisation of paediatric surgery. Subsequent organisational changes have resulted in the transfer of much of this work to specialised centres, particularly for children under four years of age. For many anaesthetists working outside these specialist centres, this has resulted in reduced opportunity to maintain competence and, perhaps of equal importance, confidence in anaesthetising small children, even though over half of all paediatric procedures still take place in district general hospitals. This book is no substitute for regular hands-on experience, but we hope that it will be helpful in providing core knowledge and tips from established experts that can be used to supplement refresher courses and clinical attachments.

We would like to thank those who have helped in developing this book, particularly family and friends who have been neglected during its long gestation. We are also grateful to Cambridge University Press for their patience as the book's post-conceptual age increased.

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