



انجمن آنستز بولوزی و مراقبتهای ویژه ایران

Third Iranian Congress of Critical Care

(The 14th Isfahan Congress On Medical and Paramedical Updates)

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Comparative study between propofol and midazolam in cardiac anesthesia for patient undergoing CABG

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Introduction: This study was undertaken to assess the effects of propofol versus midazolam on hemodynamic stability and need for inotropes and need for inotropes and recovery characteristics when used for induction and maintenance of anesthesia during elective CABG surgery.

Methods: Twenty patients scheduled for CABG were induced with propofol 1.5mg/kg and fentanyl 7 mic/kg. Anesthesia maintained with propofol 3-5 mic/kg/hr. Another 20 patients scheduled for same procedure were induced with midazolam 0.1mg/kg and fentanyl 0.7 mic/kg. Anesthesia maintained with midazolam 0.1m/kg/hr.

Results: Patient receiving propofol had less need for inotrope support during weaning from CPB (%16 versus %30), were extubated earlier (8.1 hr versus 12.2 hr) with earlier eye opening (125 min versus 190 min). Hemodynamically, drop in MAP (70 ± 5 mmHg versus 65 ± 5 mmHg) and PR changes (%5.1 versus %2.3) had no significant differences between two groups.



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3. **Discussion:** The results of this study highlight the ability to fast-track patients receiving propofol based anesthesia in CABG surgery
6. with earlier recovery and earlier extubation and lower need for
tv inotropes and without hemodynamic adverse effects.

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h **Key words:** CABG, Propofol, Midazolam

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