INHALATION ANESTHESIA WITH ISOFLURANE OR HALOTHANE IN KLINICAL HOSPITAL STIP

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APSTRACT

**Introduction**

To compare changes in central and peripheral hemodynamics, occurring in during anesthesia with isoflurane or - halothane during surgical interventions in abdominal surgery. To evaluate the time for displaying patient anesthesia.The presence of side effects in the immediate postoperative time. The **purpose** of our research was to compare the changes in the central and peripheral hemodynamic during anesthesia with isoflurane or halothane, the recovery after anesthesia and the presence of side effects in the immediate postoperative period. **Materials and methods**: The research was conducted with patients ASA I, II and III, from 39 to 74 years old, who were subject to general anesthesia and undergoing abdominal surgery. The Patients were divided into two groups with anesthetic halothane or isoflurane. The following were tracked perioperative:pulse rate, systolic, diastolic and mean arterial pressure, time of awakening, presence of side effects. The following were manner calculated noninvasive: stroke volume (SV), pulse pressure(PP) and double product (DP). Results: Isoflurane leads to significantly lower systolic, mean and pulse blood pressure, SV and cardiac output (CO) during anesthesia. Halotane leads to significantly lower systolic, mean, pulse blood pressure and SV. Recovery after anesthesia with isoflurane is faster. **Conclusion**: comparative studies of both feature balanced anesthesia have shown that both inhaled anesthetic led to a dose-dependent inhibition of cardiac function and results in both groups were comparable. Faster wake-up occurs after anesthesia with isoflurane.

Keywords: isoflurane, halothane, anesthesia, hemodynamic