

Suxamethonium chloride speeds along rapid sequence intubation

Suxamethonium chloride [succinylcholine] is superior to rocuronium bromide for rapid sequence induction of anaesthesia and endotracheal intubation, report researchers from Switzerland.

In their single-blind study, 180 patients who were undergoing general anaesthesia for emergency surgery, were randomly allocated to receive either suxamethonium 1.0 mg/kg (n = 90) or rocuronium 0.6 mg/kg, after induction of anaesthesia with fentanyl and propofol.

The endotracheal intubation sequence was significantly shorter when suxamethonium was administered, compared with rocuronium (median 95 vs 130 seconds).

Intubation conditions were scored significantly higher by the intubating anaesthesiologist for the patients who received suxamethonium, compared with those who received rocuronium (8.6 vs 8.0); this was largely due to the superior subscore rating of the response to intubation (2.8 vs 2.3). There were no significant differences between suxamethonium and rocuronium in subscores for ease of laryngoscopy and position and movement of the vocal chords. A significantly greater proportion of the group receiving suxamethonium were rated as having excellent intubation conditions, compared with the rocuronium group.

Sluga M, et al. Rocuronium versus succinylcholine for rapid sequence induction of anaesthesia and endotracheal intubation: a prospective, randomized trial in emergent cases. *Anesthesia and Analgesia* 101: 1356-1361, No. 5, Nov 2005 801025120