

Anaesthesia and children

Anaesthesia is relatively safe and can be given to children of all ages, including newborn babies.

The anaesthetist's role is to ensure your child is comfortable and pain free. The anaesthetist will stay with them at all times during the operation and monitor them closely.

In Australia and New Zealand, specialist paediatric anaesthetists are among the world's most highly trained doctors having spent years undergoing training in anaesthesia, pain control, resuscitation and managing medical emergencies.

Special skills are required to anaesthetise the very young and those with underlying illnesses. Operations will be carried out only in hospitals appropriately staffed and equipped to anaesthetise and operate on these children. Some hospitals will not accept children younger than a certain age and others do not perform surgery on children at all.

Children who are less than 12 months old, or who have complex medical illnesses, or who require major surgery for conditions, such as scoliosis, will be referred to the children's hospital in the nearest city. Other hospitals and day-surgery units accept children for routine operations such as for tonsils, grommets and dental surgery.

BEFORE THE OPERATION

Having food or drink in the stomach can be dangerous both during and after the anaesthetic, as stomach contents may enter the lungs. It is important that you speak to your doctor about when children should stop eating and drinking.

The anaesthetist will also need information such as:

- When your child last had anything to eat or drink.
- Any recent coughs, colds or fevers.
- Any previous anaesthetics or family problems with anaesthesia.
- Abnormal reactions or allergies to drugs.
- Any history of asthma, bronchitis, heart problems or other medical problems.
- Any medications your child may be taking.
- Any loose teeth.

WHAT TO EXPECT

There are various forms of anaesthesia that your child may receive, depending on the operation he or she is to have:

- General – in which your child is “asleep”.

- Regional – when one large area of the body is numbed.
- Local – when one small part of the body is numbed.

Parents may be allowed to remain with their child as he or she is anaesthetised depending on the circumstances. Discuss this option with your anaesthetist.

Children are usually anaesthetised in a way that is different from that used for adults. If an older child is prepared to have a tube inserted into a vein, known as a cannula, they are anaesthetised via an intravenous injection into the cannula. Anaesthetic cream can be used to numb the skin so the process is painless.

Children who don't wish to have a cannula, may be anaesthetised via a mask delivering an anaesthetic vapour. The procedure is painless but children can sometimes find the experience unpleasant because they are unfamiliar with the people and the environment; and they may find the mask, which is gently put on their face, intrusive and scary, and the vapour smells. This experience has no long-term detrimental effects and after breathing through the mask, it may take up to a few minutes for the child to lose consciousness and be anaesthetised.

As the child breathes the vapour and loses consciousness, his or her eyes may roll back. They may snore or move their arms or legs. All these are part of the normal process as the child moves through different stages of sleep.

Parents will be asked to leave the room after the child is anaesthetised.

AFTER THE OPERATION

Once the surgery is finished and your child is awake in the recovery room, you may be called to be with them.

The nursing staff in the recovery room will continue to monitor your child and ensure that your child continues safely through the recovery phase. Should there be any issues with pain, nausea or vomiting, or unusual bleeding from the operation site, the nursing staff will follow strict instructions to treat these.

Often a child will cry upon waking from an anaesthetic and there are multiple causes for this, including waking in an unfamiliar environment, pain and sometimes a type of confusion that can be caused by anaesthesia. Children with this condition may be agitated, restless and confused. The condition resolves with time, but may need an anaesthetist to administer medication to settle the child.