

特 集 (special edition)

PROLOGUE FOR THE INTERNATIONAL SYMPOSIUM ON "ISCHEMIC HEART AND ANESTHESIA"

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First, we would like to express our sincere gratitude and extend a most cordial welcome to Professor van der Vusse from the Netherlands and Professor Mangano from USA who have come all the way to Japan to participate in this symposium and make the symposium more fruitful.

Before asking each speaker to talk on his topic, we would like to say a few words about this symposium.

Modern diagnostic and therapeutic strategies make it possible to detect and treat myocardial ischemia before, during and after surgery. However, we should not forget the many contributions of basic science to these strategies. This international symposium on "ischemic heart and anesthesia" fills a great need because Dr. Mangano will emphasize the multidisciplinary or multicenter approach to the detection and management of perioperative ischemia. In his lecture "perioperative cardiac morbidity: new developments and controversies," Dr. Mangano suggests that increased attention and resources focussing on the prevention of (and possibly therapy for) postoperative

ischemia may well be the key to reducing postoperative cardiac morbidity. We are confident that the audience will be more informed about the mechanisms of myocardial ischemia and infarction, how to detect them, and how to treat them.

The pathophysiology of myocardial ischemia will be discussed in great detail in this symposium. Dr. van der Vusse will focus on "cardioprotection of the ischemic heart: a possible role for phospholipase inhibitors," and Dr. Hashimoto will talk on "reperfusion arrhythmia and its modulation by drugs." These discussions and others are necessary to enrich our knowledge of the mechanisms of myocardial ischemia. Such knowledge is essential to those who are responsible for patient care during the surgical procedure and immediately afterwards. Other topics and speakers involved in the symposium are as follows: "myocardial ischemia and sympathetic activity" by Dr. Kohyama; "changes of myocardial ischemic areas by anesthesia-thermographic determination" by Dr. Yokota, et al; "effects of inhalation anesthetics on myocardial metabolism during postischemic reperfusion" by Dr. Kashimoto, et al; "influence of anesthesia on ischemic myocardium" by Dr. Tsuchida, et al; "myocardial fatty acids during ischemia and reperfusion" by Dr. Nasa; and "detection of myocardial ischemia by electrocardiography and

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transesophageal echocardiography” by Dr. Nomura, et al. These discussions will surely indicate that a keen linkage between clinical investigation and basic studies are necessary throughly to understand the mechanisms of, and to detect and treat, perioperative myocardial ischemia.

Postoperative care of the patient should be guided by the cooperative effort of anesthesiologists, surgeons and cardiologists. They should be skilled in evaluating the patient before anesthesia and surgery, avoiding complications during surgery, and managing the patient in the postoperative intensive care unit for several days.

As will be discussed in the symposium, controlling of various forms of perioperative stress and maintaining a “stress-free” state in the perioperative period, are probably most important. Of course, further clinical investigation of

the natural history, diagnosis, and treatment of perioperative myocardial ischemia is sorely needed along with pathophysiological analyses of ischemia in animal models, in particular, at the intracellular level.

The purpose of this symposium is to highlight the knowledge and skills required to ensure the safest care of the patient in the perioperative periods. We sincerely hope that all who participate in this symposium will understand fully the results of the speaker’s continuing research and comfort of surgical procedure in patients who have, or might have ischemic heart disease. This international symposium on “ischemic heart and anesthesia” will be certainly helpful in furthering the understanding of the mechanisms of myocardial ischemia, thus contributions towards the detection and treatment of perioperative myocardial ischemia, and in substantially lowering morbidity and mortality.

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