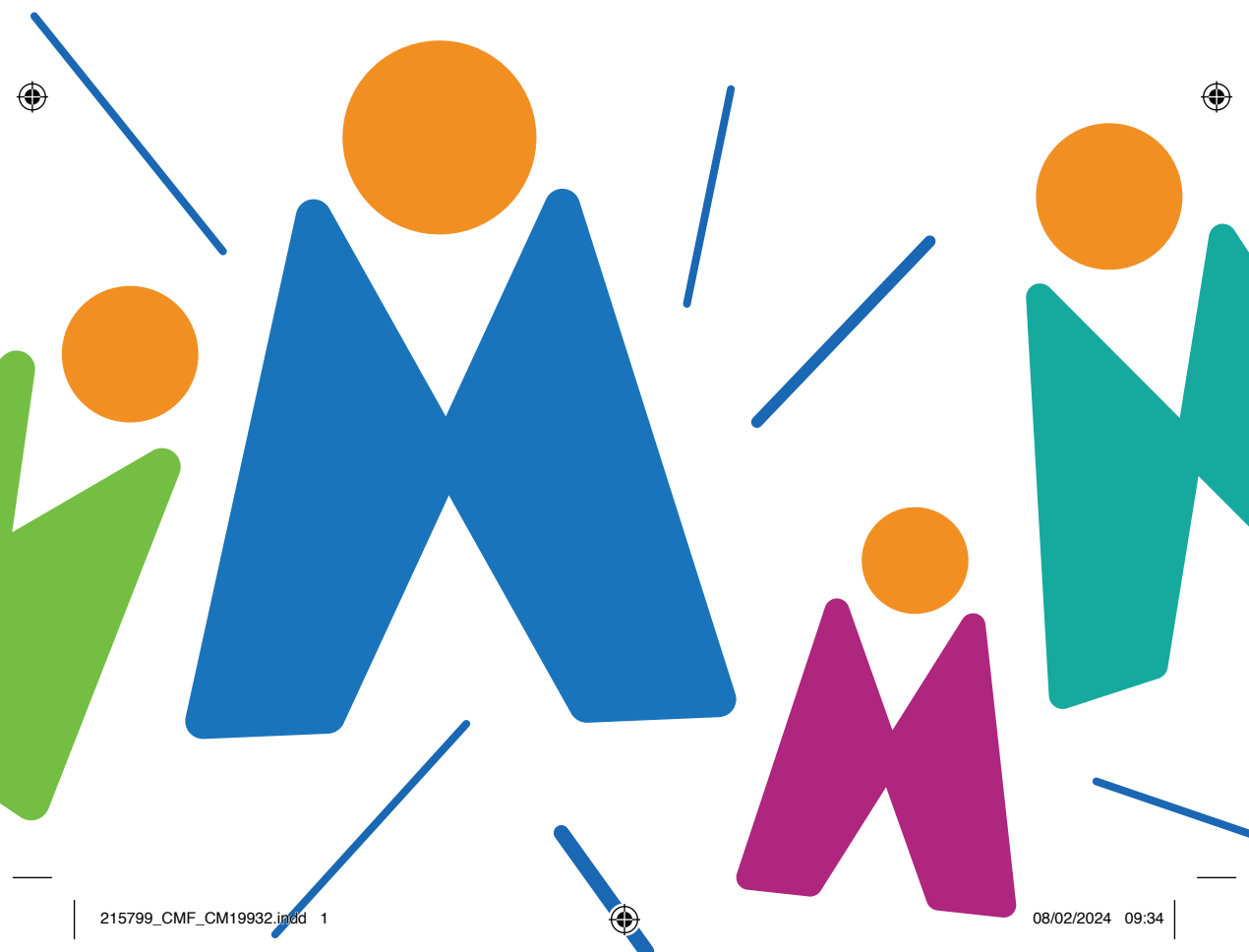


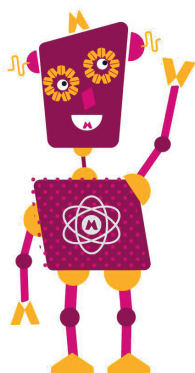
A Brief Guide to Your Child's General Anaesthetic: Children with Higher Risk Medical Conditions

Information for Patients, Parents and Carers
Royal Manchester Children's Hospital



Introduction

A general anaesthetic is given by specialist doctors called anaesthetists to ensure your child is deeply asleep (unconscious) and pain free, whilst they are having surgery or procedure.



Information for **all children and families** is included in our leaflet: **A Brief Guide to Your Child's General Anaesthetic**. It contains information about how an anaesthetic is given, and general information about risks for all children. It should be read alongside this leaflet.

This leaflet is to provide further information about risk for children with complex medical conditions having an anaesthetic.

What are the possible risks with General Anaesthesia?

Risks that are relevant for **all children** having an anaesthetic include problems such as dental damage, nausea and vomiting, allergic reactions, breathing difficulties and temporary behavioural changes following surgery. The risk information for **all children** has been summarised by the Royal College of Anaesthetists, and can be accessed following the QR code below:



For children that do not have medical problems, and are having minor surgeries, having anaesthesia is very safe. Unexpected emergencies can occur, but they are rare.

For children that have complex medical problems, the risks of having an anaesthetic increase. This is because anaesthetics can affect the heart and lungs, and children who have underlying medical problems can be more likely to have these problems already, and they get worse under anaesthetic.

Children with more medical problems can also be less able to manage with the 'stress' major surgery has on the body, and with problems that can happen afterwards such as infection.

For children having major surgeries, the risks come also from complications associated with the surgery – for example major bleeding.

What are the serious risks associated with general anaesthesia?

Although children who have complex medical conditions have more risk of complications under anaesthesia and after surgery, the risks are different for each child and procedure. These risks will be discussed with you prior to your child's anaesthetic at a pre-assessment appointment and on the day of surgery.

When complications occur under anaesthesia or during surgery, they can often be treated in theatre and have no long lasting effects. However, in more serious forms can lead to unexpectedly needing oxygen and other medication after surgery, a critical care admission, and/or a long

hospital stay. For some patients or surgeries we may predict the chance of complications is quite high, and we will discuss this with you.

In the most severe forms, risks associated with anaesthesia and surgery can include intensive care admission, cardiac arrest, brain damage or death.

Airway and breathing complications

Children who already have breathing problems, including an underlying lung condition, airway abnormalities, low muscle tone, and difficulty managing airway secretions, are all more likely to have a serious breathing problem in theatre and need more support post operatively.

Children with underlying breathing problems or frailty are also more likely to get serious complications after surgery such as a chest infection.

Heart and circulation complications

Children that have serious heart problems, have long term severe muscular conditions, or are very frail

and inactive, are more likely to have heart and circulation problems under anaesthetic. This may include an irregular heart rhythm or low blood pressure. In the most severe forms these can lead to cardiac arrest and death, although this is rare.

Other types of complications:

- Pain from major surgery can impact your child's ability to breath well, move around and therefore can increase risk of infection.
- Skin and tissue damage including nerve injury can occur, particularly if the surgery is long and your child is frail.
- Kidney function can be affected by major surgery, particularly in children who already have kidney problems.

For all children it is important is balancing the risks of surgery and anaesthesia, with the benefits of having the surgery, and to try and prepare for the surgery and anaesthesia in advance.

Pre-assessment and Preparation:

All children having a planned procedure will be asked to fill in a health questionnaire as part of the pre-assessment process. This an important step as children with more complex medical problems will be given an appointment with a senior paediatric anaesthetist (consultant) prior to their surgery.

Why does my child need to have an anaesthetic pre-assessment appointment?

There are many reasons why a consultant anaesthetist assessment appointment may be planned.

These include:

- Being born early (prematurely)
- Having a lung condition
- Having a heart condition, or previously having heart surgery
- Having a condition that affects brain, nerve or muscle development
- Having a genetic condition
- Having a blood clotting condition
- Being very overweight
- Having significant additional sensory needs

- Previously having a problem under anaesthetic
- Having a family history of anaesthetic problems

Your child may have had previous anaesthetics without any problems, but for major surgeries, or if a long time has passed since the last anaesthetic, it is still important to see you in the clinic.

What will happen in the clinic appointment?

The appointment with the consultant will be about 30 minutes long. Please bring any medication, inhalers or creams your child is taking, as well as any information you may have from other hospitals that look after your child.

In the clinic we will:

- Take a more detailed history about your child, or your family's, medical problems
- Review previous anaesthetic information
- Perform an examination of your child including airway, chest, and heart
- Look at recent test results, or ask for further tests to be carried out

- Get advice from other speciality doctors who already know your child, or refer for an appointment with another team
- Consider whether an overnight stay or critical care bed might be needed after surgery
- Talk with you about the anaesthetic, and discuss any important risks for your child, and the type of surgery they are having
- Talk with older children about what they can expect from their anaesthetic and recovery

This is all to improve the safety of the anaesthetic and surgery for your child, and to keep you fully informed during the process.

What if my child is not 'fit' for surgery?

Sometimes, if your child has been unwell recently, and your surgery is very soon, we might advise a delay. Although we would discuss this with the surgeon and help to get another date.

Occasionally we might advise the operation is done at another hospital for example if your child has a very serious heart condition.

In rare cases, where we feel the procedure is very high risk, we may have a meeting with the group of speciality doctors who already look after your child. We want to make sure the benefit of the surgery is likely to be greater than the risks. Sometimes a non-surgical, or less invasive option might be available for treatment. We will consider this as a team.

As the parent or legal guardian you are equally important in these discussions, as are children who are old enough to make important decisions for themselves.

What should I do in the days before my child's procedure?

What if my child has a cough or a cold?

It is very important for children with complex medical problems, or having major surgeries, to be free of common illnesses when they have an operation. Infection makes it more likely they will have problems under anaesthetic or in their recovery period. This risk can even occur if your child has had a chest infection in the previous 4-6 weeks.

Your child will be assessed by their anaesthetist on the day of surgery, but it is not always possible to detect very early stages of infection, or to fully predict the effect of a recent infection.

If your child is unwell or has been exposed to an infectious disease such as chickenpox, please contact the hospital.

What do I do about my child's medications?

Please bring any medication, inhalers, or creams your child is prescribed, with you to the hospital.

For most medications e.g to treat epilepsy, steroid replacement, or to prevent dystonia, it is important they are continued as usual. There are some medications you may be asked to stop such as blood thinning medications, or some anti-hypertensive drugs. If you have any doubts or questions, please contact the hospital.

Medications can all be taken with water up to an hour before surgery.

I am worried about not giving my child food or drink before the surgery...

All children coming in for a planned operation or procedure under general anaesthetic should have an 'empty' stomach. This means they must not have anything to eat (or drink milk or fizzy drinks) for 6 hours before, and only have water or 'clear fluids' for one hour before. This helps to make the anaesthetic safer, preventing breathing complications due to vomiting under an anaesthetic.

It is also important to keep this time as short as possible to avoid low blood sugar or dehydration. This may involve an additional feed late at night, or waking up in the early hours to stop any feed that would usually run until the morning.

You will be sent fasting instructions in the surgical appointment letter.

What should we expect on the day of surgery?

You will meet your child's anaesthetist on the day of surgery. They will ask if there are any updates since you were seen in clinic. They will talk to you again about any more procedures they think are necessary for monitoring or pain relief, and again about the risks of anaesthesia. You will have an opportunity to ask questions.

Sometimes you may be waiting while we get confirmation about a post operative bed, particularly if it is a critical care bed. Occasionally a procedure may need to be cancelled if there isn't the bed available for the safest care afterwards.

For information about how anaesthetics are given, please read our leaflet: A Brief Guide to Your Child's Anaesthetic. Or you can access information available on the Royal College of Anaesthetists website via the QR code below.



This website also includes child friendly resources and translated information for families.

What happens after surgery?

You will be asked to go to recovery to be with your child as soon as they are awake. Even children with complex medical problems can sometimes have their surgery or procedure as a 'daycase' if it is short minor surgery. Some children will need to stay overnight.

It may have been planned that your child stays asleep and goes to intensive care after surgery. This is usually when the surgery is very long or complex, or for example if the surgery was an emergency, and your child was very sick.

Occasionally we decide to keep your child asleep following surgery when it has not been planned. This may be if there has been a complication such as breathing difficulties or bleeding.

If this occurs the surgeons and anaesthetists will explain everything to you as soon as they can.

In Summary

General anaesthesia is usually safe. Risks of anaesthesia increase if you have underlying complex medical conditions, if you are a baby, if you are having major surgery or if you are having urgent or emergency surgery.

We try to prepare all patients for surgery and anaesthesia. Unfortunately, not all risks are either fully predictable or avoidable.

The purpose of most surgeries is to improve function or quality of life. The balance of risk and benefit of surgery or a procedure or investigation under anaesthetic is for discussion between yourselves, your surgeon, your speciality doctor, and your anaesthetist. Please ask us questions.

Contact Details:

Schedulers: 0161 701 525

Pre-assessment nursing team:
0161 2765130.

Questions

We understand that there may be questions that either you or your child would like answering. Most of us forget what we were going to ask the doctor or the nurse.

Please write your questions overleaf.



This image shows a full page of white paper with horizontal dotted lines, typical of primary school writing paper. The lines are evenly spaced and run across the entire width of the page. There are no margins, text, or other markings present.

[illegible]

No Smoking Policy

Please protect our patients, visitors and staff by adhering to our no smoking policy. Smoking is not permitted in any of our hospital buildings or grounds, except in the dedicated smoking shelters in the grounds of our Hospital site.

For advice and support on how to give up smoking, go to www.nhs.uk/smokefree.

Translation and Interpretation Service

It is our policy that family, relatives or friends cannot interpret for patients. Should you require an interpreter ask a member of staff to arrange it for you.

تتص سیاستنا علی عدم السماح لأفراد عائلة المرضى أو اقاربهم أو اصدقائهم بالترجمة لهم. اذا احتجت الى مترجم فيرجى ان تطلب ذلك من احد العاملين ليرتب لك ذلك.

بماری یہ پالیسی ہے کہ خاندان، رشتہ دار اور دوست مریضوں کے لئے ترجمہ نہیں کر سکتے۔ اگر آپ کو مترجم کی ضرورت ہے تو عملے کے کسی رکن سے کہیں کہ وہ آپ کے لئے اس کا بندوبست کر دے۔

ইহা আমাদের নীতি যে, একজন রোগীর জন্য তার পরিবারের সদস্য, আত্মীয় বা কোন বন্ধু অনুবাদক হতে পারবেন না। আপনার একজন অনুবাদকের প্রয়োজন হলে তা একজন কর্মচারীকে জানান অনুবাদকের ব্যবস্থা করার জন্য।

Nasze zasady nie pozwalają na korzystanie z pomocy członków rodzin pacjentów, ich przyjaciół lub ich krewnych jako tłumaczy. Jeśli potrzebują Państwo tłumacza, prosimy o kontakt z członkiem personelu, który zorganizuje go dla Państwa.

Waa nidaamkeena in qoys, qaraaboamasaaxiiboaysanu tarjumikarinbukaanka. Haddiiaad u baahatotarjumaankacodsoxubinka mid ah shaqaalahainaykuusameeyaan.

我们的方针是，家属，亲戚和朋友不能为病人做口译。如果您需要口译员，请叫员工给您安排。



@MFTNHS



Follow us on Facebook

www.mft.nhs.uk

© Copyright to Manchester University NHS Foundation Trust

TIG 43/23

Ratified 1st November 2023

Review Date 31st October 2026

(SF Taylor CM19932)