



Core body temperature monitoring using Baska airway



Sir

Authors and roles

Core temperature monitoring during general anesthesia exceeding 30 minutes has been recommended [1] “However, measurement of core temperature can be difficult with the use of supraglottic airway devices especially during ENT surgery.” We have found out that the use of Baska mask (Baska Versatile Laryngeal Mask Ltd, Strathfield, Australia) which is a non-cuffed extraglottic airway device can overcome this limitation satisfactorily. A 23-year-old, 41-kg, female was posted for excision of hyper pigmented patch and split skin graft cover of a hypertrophic scar over her left arm under general anesthesia. After institution of standard monitoring in the form ECG, NIBP, SPO₂ and EtCO₂, anesthesia was induced with fentanyl 2 µg/kg and propofol 2.5mg/kg body weight. The airway was secured with size 3 Baska airway with a proper seal and adequate ventilation was established. A well lubricated suction catheter was introduced through one of the gastric channels of the Baska airway. The temperature probe was advanced without any resistance to the other draining channel to a depth we estimated to be corresponding to lower third of the esophagus (Fig. 1). Intra-operative temperature monitoring was achieved satisfactorily and the procedure was finished uneventfully after 210 minutes.

1. Discussion

The Baska mask is a self-sealing membranous, variable-pressure, non-inflatable, recoiling cuff made of medical grade silicone, designed in such a way that during IPPV, the seal apposes to the glottis incrementally to augment seal pressure with increasing airway pressure with some additional safety features that includes a sump cavity with two aspiratable gastric drain tubes and a suction elbow integral to one port with a second port acting as a free air flow access [2]. These features help to reduce the risk of possible pulmonary aspiration of secretions or gastric contents that accumulate in the supraglottic area [3]. The presence of the temperature probe, owing to its small diameter, did not interfere with the functioning of the port meant for decompression.

Performing esophageal temperature measurement using the drainage tubes of the proseal laryngeal mask airway [4] and the gastric channel of the I-gel have been described [5]. However, both of these strategies interfere with the original role of the gastric channel in minimizing the risk of regurgitation and gastric distention. The presence two gastric draining channels in the Baska airway overcomes this limitation and has the advantage of measuring continuous core body temperature as well decreasing the possible risk of aspiration. We found this yet another reason for use of this device wherever appropriate.

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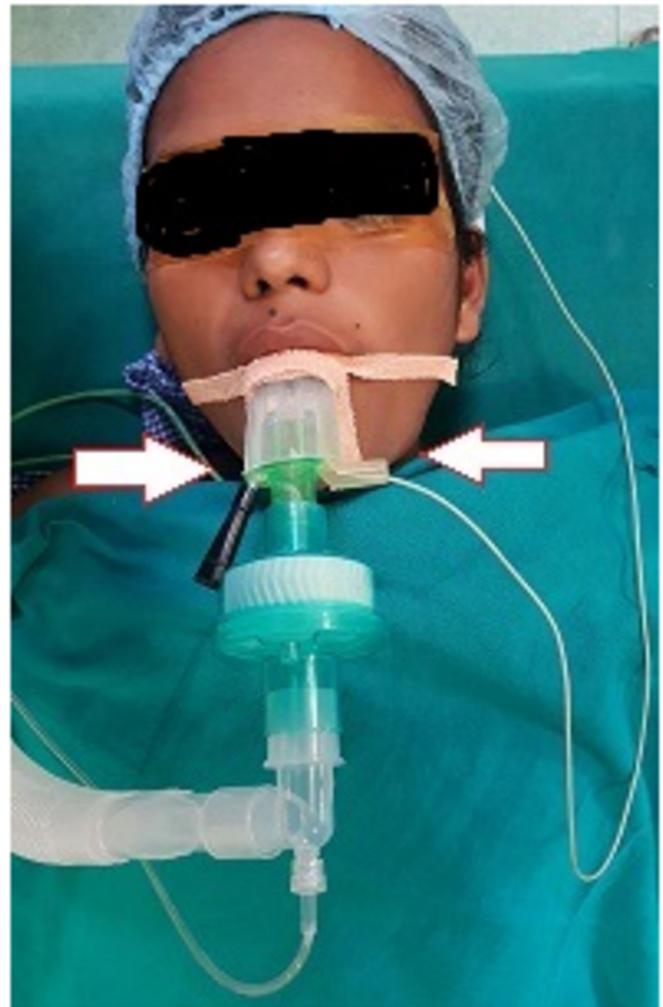


Fig. 1. Arrow showing the Baska Airway with suction catheter and temperature probes in both draining channels.

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Conflicts of interest

Not applicable.

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