Cricoid Pressure Improves Glottic View with Truview EVO2 Laryngoscope

But only a bit, and, all views, with or without pressure, were excellent.

The Truview EVO2 laryngoscope has a steel blade that incorporates a telescope-like optical device to provide an indirect view of the vocal cords. A video camera can be attached to the proximal lens to provide video-monitoring capability. Researchers in New Delhi randomized 50 adult elective surgery patients to intubation with the Truview EVO2 laryngoscope either with or without cricoid pressure (CP). Patients who had predictors of difficult airways (body-mass index >30 kg/m², mouth opening <3 finger breadths, American Society of Anesthesiologists physical status >II, facial trauma) were excluded.

An observer blinded to the assignment viewed a video monitor and assessed the percentage of glottic opening (POGO) score (score range, 100% if the entire glottis is visualized to 0% if none of the glottic opening is seen). In the CP group, the POGO score was assessed first without CP, and then with CP applied, and the patient was intubated with CP applied. In the no-CP group, the POGO score was assessed first with CP applied, and then without CP, and the patient was intubated without CP.

Baseline patient characteristics were similar in the two groups. In the two groups combined, glottic views were significantly better with CP than without CP (mean POGO score, 93% vs. 81%). However, no significant differences were noted between the two groups in time to intubation (14.2 and 14.0 seconds) or percent of intubations that required more than one attempt (16% and 4%).

Comment: All glottic views with the Truview EVO2 laryngoscope were excellent in this study. Cricoid pressure — or backward, upward, rightward pressure on the larynx — should be used when the initial glottic view is not adequate for intubation.

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