

CS#11

Cervical Spine Motion: A Fluoroscopic Comparison of the AirTraq versus the Macintosh

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T.P. Turkstra et Al. University of Western Ontario, London, ON, Canada

We studied 24 patients. Manual in-line stabilization was provided by an assistant.

C-spine motion was 53%, 95%, and 60% less during laryngoscopy with ATQ compared to the Macintosh blade at the Occiput-C1, C2-C5, and C5-Thoracic motion segments.

Improved view might be valuable in situations of suspected trauma to the larynx or vocal cords.

The AirTraq may be a useful tool to experienced users in the setting of “uncleared” C-spine patients, particularly if an injury is suspected in the Occiput-C1 or C2-C5 areas of the C-spine or below.

Data maybe more relevant to the prehospital setting, where patients with uncleared C-spines could be expected more frequently.

