

MS#12

Airway management at floor level: a comparison of tracheal intubation using the macintosh and Airtraq

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Sixty volunteers attending a medical conference with **no prior Airtraq experience**, who were skilled in pre-hospital Macintosh intubation, were recruited.

Each was required to intubate an anatomically correct manikin **at floor level** using a Macintosh and Airtraq laryngoscope.

The Airtraq was found to be superior in ease of use (VAS 30mm, P<0.001), had a shorter total intubation time (19.4seconds) and a higher intubation success rate (P=0.012) than the Macintosh laryngoscope (VAS 50mm, 20.4seconds).

Rotating the tracheal tube 90° anticlockwise during loading into the guiding channel, made the Airtraq intubation easier (VAS 30mm, P=0.001) and faster (19.4seconds, P<0.001) than with standard orientation of the tube (VAS 40mm, 25.3seconds).

Airtraq intubation may prove to be easier than Macintosh intubation, when utilised in the clinical pre-hospital setting, though randomised controlled clinical trials are required to confirm this.