Tracheal Intubation Using the Airtraq in Morbid Obese Patients Undergoing Emergency Cesarean Delivery

Anesthesiology 2007; 106:629–30
G. Dhonneur. Jean Verdier Public University Hospital of Paris

Two cases of rapid tracheal intubation with the Airtraq after failed direct laryngoscopy in morbidly obese patients undergoing emergency cesarean delivery.

Two validated airway devices allow visualization of the glottis without alignment of oral and pharyngeal axes: LMA CTrach and the Airtraq Laryngoscope (AL).

LMA CTrach, mean time to securing the airway was almost 3 min.

Airtraq in association with rapid sequence induction resulted in a shorter delay (<1 min in most cases).

We are now considering placing the Airtraq as a primary airway management device in the case of emergency cesarean delivery in women showing predictive difficult airway factors at labor or operating room clinical evaluation.