

Poster presentation

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Oropharyngeal complications of using laryngeal mask airway-case series

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Introduction

The reinforced Laryngeal Mask Airway (LMA) is now increasingly being used for head and neck procedures. However, their use is not without complications and attendant morbidity. We report three cases of postoperative sore throat due to severe pharyngeal trauma following the use of a reinforced LMA.

Series report

In the first and second cases, a 27-year-old male and a 56-year-old male underwent septoplasty, submucosal diathermy to inferior turbinates and bilateral antral wash-outs. While in the third case, a 44-year-old-female underwent bilateral temporomandibular joint arthroscopy and arthrocentesis.

Size 4 LMA was used in all cases. No throat pack was used. Each procedure took less than an hour. A plastic Yankauer sucker was used under direct vision to clear the supraglottis and the posterior pharynx of retained secretions and blood. The LMA was then removed by the anaesthetist on recovery of the patient.

Postoperatively the patients complained of a severe sore throat with evidence of significant palatal abrasions and uvular swelling on examination. On later review the sore throat was reported to have lasted around 5–10 days. At the six week outpatient review, all patients reported full recovery with no visible evidence of residual palatal or uvular scarring or other anaesthetic sequelae.

Conclusion

LMAs are useful and occasionally life saving airways adjuncts but are not without complications. Both the surgeon and anaesthetist should recognise and ensure trauma is minimised to the oropharynx during all stages of surgery.