Background: This randomized, double-blind placebo controlled study was undertaken to evaluate effect of intravenous magnesium sulphate for hypotensive anesthesia in patient for spinal surgery. Materials and Methods: Sixty patients undergoing spinal surgery were included in two parallel groups. The magnesium group (M) received magnesium sulphate 40 mg/kg as a bolus before induction of anesthesia and 10 mg/kg/hr by continuous infusion during operation through out surgery. The control group (C) as above received isotonic saline solution both as bolus and infusion at the same rate. Result: The surgical time was reduced in magnesium group [170 (40 minutes)] vs. [180 (45 minutes)] in control group. The anesthetic time was longer as observed thus a prolongation in emergence from anaesthesia. Conclusion: Intravenous magnesium sulphate led to a significant decrease in mean arterial pressure, heart rate, and duration of surgery. It also alters anesthetic dose requirements.

23. Intraoperative management of cerebral arteriovenous malformations: Our experience

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Background: To discuss the institutional experience in the intraoperative management of symptomatic patients of cerebral AVM surgery. Materials and Methods: It is a retrospective descriptive study done in patients with cerebral AVMs who were managed by surgery at KIMS hospital between January 2010 to July 2013. Totally 20 patients are included in this study. Results: Of the total patients who underwent surgery there were equal no of patients who had bleeding and who did not. Of the