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Quick response code

Tracheo-oesophageal fistula with sub-glottic stenosis: Another option for airway management

Sir,

We read with interest the article, 'Complicated airway management in a neonate of congenital tracheo-oesophageal fistula with subglottic stenosis' by Kerai *et al*.[1] We congratulate the authors for their excellent management. We faced similar problem in two cases of congenital tracheo-oesophageal fistula (TOF) with sub-glottic stenosis. In our cases, tracheostomy was required for securing definitive airway due to the same reasons as suggested by authors. However, we used Ambu™ laryngeal mask airway (LMA) size 1 to maintain the airway during tracheostomy. LMA has been used previously for tracheostomy in a neonate.[2] Supra-glottic airway device (SAD) has many advantages over face mask during tracheostomy. SAD helps in ventilation and also keeps the neck area sterile for tracheostomy. Assisted ventilation will be easier with SAD compared to face mask, and chances of aspiration during the procedure will be less. In pre-term infant, face mask ventilation is difficult; further, hands holding the face mask will encroach surgical area and there will be risk to sterility during tracheostomy. In case of difficult ventilation, movement of the head and neck will lead to difficulty in surgical procedure.

We suggest that SAD is a better option over face mask to maintain airway during tracheostomy in pre-term infants with TOF with sub-glottic stenosis.

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REFERENCES

1. Kerai S, Gupta A, Kohli JK, Sharma J, Sood R. Complicated airway management in a neonate of congenital trachea-oesophageal fistula with subglottic stenosis. Indian J Anaesth 2016;60:142-3.
2. Denny NM, Desilva KD, Webber PA. Laryngeal mask airway for emergency tracheostomy in a neonate. Anaesthesia 1990;45:895.

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