

(Basic practice of Anesthesiology History and Introduction of anesthesia)

Anesthesia; is a Greek word mean no sensation

Anesthesia; is abolition of sensation

Analgesia is abolition of pain

So, **anesthesia need** (unconsciousness, muscle relaxation and analgesia).

Anesthetic plan;-(general anesthesia-regional anesthesia) depend on

1. plan of surgery
2. age
3. medical condition.

+ Preoperative assessment and premedication.

+ Intraoperative; consist of (Induction, maintenance and recovery)

Intraoperative management Monitoring, positioning of the patient, care of body parts [eye care]and intraoperative giving of Blood, medicine, fluids and others.

+ post-operative care:

Pain management and ICU care

History of anesthesia

Discovery of anesthesia was started in rural Georgia in America at 1842 by medical practitioner Dr. Crawford to produce surgical anesthesia by [inhalation of ether]

Then it started to use by a dentist Dr. William to remove tumor from mandible by (ether), but it was not well known till October 16 \1846(ether) demonstrated in surgical operation and became

announced in front of audience (include surgeons, medical student and press). Then it started to spread in England by use it in [labor pain]

(Chloroform) was the second element that used in England by Dr. John Snow that considered the first anesthesiologist because he was the 1st to devote his medical practice to administration of anesthesia. Dr. John Snow administrated this element to Queen Victoria during the birth of prince Leopold at 1853.

Another American dentist (Dr. Horse) was the 1rst to recognized [nitrous oxide N₂O] as an anesthetic element for revealing pain during tooth extract, later it fell into disrepute when it used later for surgical purposes until it identified by (Dr. Andrews) in Chicago as anesthetic agent for surgical purposes by mixing it with oxygen (O₂+N₂O) and this was appreciated.

Surgical operations expanded and developed needed an agents or anesthesia with less side effects [Cyclopropane] started to compete with the previous elements because of it supporting to circulation

In spite of that until 1950s all these available agents had one or more defect like explosion with O₂ as ether or cyclopropane, or toxic effect like chloroform.

The evolution of [Fluorine] technology 1950s by separating uranium isotopes for development of atomic bomb led to new inhaled anesthetic agent [Fluorine] less flammable less organ toxicity

Then the modern inhaled anesthetic elements [one gas N₂O+O₂+vapors of volatile liquid (halothane, enflurane, isoflurane, desflurane, sevoflurane and others).

The end