AN ANAESTHETIC SPRAY

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IN PAEDIATRIC ANAESTHESIA, topical anaesthesia is mainly confined to the larynx and trachea and usually precedes intubation. As spraying is usually performed during a period of apnoea, the time available is limited. Experience with various sprays has indicated the need for two features:

(1) A metal barrel and a nozzle of a somewhat large bore. The metal barrel enables the spray to be directed accurately despite anatomical difficulties. The large bore nozzle is less prone to blockage and enables an adequate amount of agent to be delivered with two or three sprays. Two different tubes are supplied for straight and curved laryngoscope blades;

FIGURE 1. Anaesthetic Spray.

(2) Ease of maintenance and spare parts. The apparatus can be totally dismantled and repaired within minutes. Perishable parts have been reduced to a minimum. The rubber bulb is a standard B.P. bulb and polyethylene and rubber tubing are readily available.

With these considerations in mind, a spray was designed as illustrated†. Sprays similar to these have been in constant and satisfactory use for several years.

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†Available from Down Bros. and Mayer & Phelps Ltd., 70 Grenville Street, Toronto, Canada.