In reply: Comparing face-to-face intubation with different devices

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To the Editor:

We thank Dr. Zhang and his colleagues [1] for the interest they expressed in our article which recently appeared in the *Journal of Anesthesia* [2]. The results of our study show that the AirtraqTM, GlidescopeTM and FastrachTM laryngeal mask airway (LMA) devices can be used for face-to-face tracheal intubation in patients under standard room lighting. There are many potential study designs for testing these video laryngoscopes. However, I do not agree that all emergency intubations must be done under daylight conditions; other factors, such as when and where the patient is found, also play a role. I read the study by Ueshima and Asai with great interest; these authors concluded that the AirtraqTM device can be used in all types of lighting [3].

In our study we found that optimizing ventilation prolonged the intubation time needed for the FastrachTM LMA device. In addition, the FastrachTM LMA device could not be used in the dark; a light source or another person to assist was always needed. However, our results indicate that the FastrachTM LMA device is still a good alternative

for managing a difficult airway. In our study, we enrolled 40 patients per group and attempted to intubate all of them. We were unable to intubate one patient using the GlidescopeTM device and four patients using the FastrachTM LMA device after three intubation attempts.

Compliance with ethical standards

Conflict of interest The author declares that he has no financial or competing interests.

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