TITLE:

OCULOPHARYNGEAL MUSCULAR DYSTROPHY: POSTOPERATIVE COMPLICATIONS

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INTRODUCTION: Oculopharyngeal muscular dystrophy (OPMD) is a genetic disease with autosomal dominant transmission. It is particularly prevalent in Quebec where its prevalence is about 1:1000. The main features are bilateral ptosis and dysphagia. These symptoms are frequently treated surgically by levator palpebrae resection (LPR) and cricopharyngeal myotomy (CPM). The objective of this study was to evaluate the anesthetic risk and the complication rate of OPMD patients undergoing one of these two surgeries.

METHOD: Authorization of the institution was obtained. Medical records of all OPMD patients who had either LPR or CPM between 1997 and 2002 were reviewed. The following complications were collected: death, pneumonia, aspiration pneumonitis, airway obstruction, reintubation and profuse secretions causing severe cough. Statistical analysis was done with the Student t-test, the Welch test and the Fisher exact test when appropriate.

RESULTS: One hundred and fifteen OPMD patients were studied. Sixty patients had LPR under general anesthesia and 22 under local anesthesia. Thirty-three patients had CPM under general anesthesia. There was no death or reintubation. Patients who had LPR under local anesthesia had shorter PACU ($p<0.001$) and ASU ($p<0.001$) stay than those who had the same procedure under general anesthesia. Complications were more frequent after CPM than LPR ($p<0.001$).

DISCUSSION: This is the first study assessing the postoperative risk in OPMD patients. The complication rate after LPR was low and similar between general and local anesthesia ($p=0.57$). Patients having CPM presented more complications than those having LPR. We conclude that both local and general anesthesia are safe alternatives in OPMD patients operated for LPR, and that patients having CPM present a significantly higher risk of postoperative complications.

TABLE

	LPR	LPR	CPM
	Local anesthesia	General anesthesia	General anesthesia
Age (years)	62.6 ± 7.2	63.3 ± 6.7	69.5 ± 7.8
Weight (kg)	64.5 ± 14	67.0 ± 15.7	53.0 ± 14
Women (%)	59	45	76
Preoperative dysphagia (%)	68	68.3	100
Duration of surgery (min)	92.8 ± 28.1	99.0 ± 24.5	94.8 ± 45.6
PACU stay (min)	26.1 ± 14	72.5 ± 27.3	96.9 ± 28.9
ASU stay (min)	237.5 ± 86.1	348.0 ± 80.2	-----
Complications: (%)			
Pneumonia	0	0	9.1
Aspiration pneumonitis	0	0	3.0
Airway obstruction	0	3.3	9.1
Profuse secretions and cough	0	5.0	33.3