Esmolol Compared to Fentanyl on Hemodynamic Effects: A Scoping Review Anna McCleskey BSN, RN, SRNA, Landon McDonald MSN, RN, CNL, Tim Moore BSN, RN, SRNA, Jamie

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Purpose

The purpose of this DNP project is to compare the efficacy of esmolol to fentanyl in attenuation the hemodynamic response associated with direct laryngoscopy.

Specific Aims

- Compare the effects of esmolol to fentanyl on patient heart rate during laryngoscopy
- Compare the effects of esmolol to fentanyl on patient mean arterial pressure during laryngoscopy

Background

Sympathetic Response the Direct Laryngoscopy

• Characterized by an increase in heart rate and/or blood pressure, as well as disturbances to cardiac rhythm.

Consequences

- Sympathetic response to endotracheal intubation may occur in up to 40% of critically ill patients (Hashemian et al., 2018).
- Patients suffering from cardiovascular disease and coronary artery disease may experience decreased ventricular filling, increased peripheral vascular resistance, myocardial ischemia, and possible death (Vaishnav & Chaudhari, 2016).



Results

Characteristics of 15 articles and sources of evidence:

- Four= Level I
- Nine= Level II \circ Two= Level IV

X (copy symbol as needed)	Т	2	3	4	5	6	7	8	9	10	н	12	13	14	15
Level I: Systematic review or meta-analysis										x	x	x		x	
Level II: Randomized controlled trial	x	x		x	x		×	x	x				×		×
Level III: Controlled trial without randomization															
Level IV: Case-control or cohort study			x			×									
Level V: Systematic review of qualitative or descriptive studies															
Level VI: Qualitative or descriptive study, CPG, Lit Review, QI or EBP project															
Level VII: Expert opinion															

1 = Bhargava, S., et al. (2020); 2 = Gogus, N., et al. (2014); 43 = Vaishnav, D., Chaudhari, A. (2016); 4 = Bhalke, R., et al. (2017); 5 = Ugur, B., et al. (2007); 6 = Gupta S., Tank P. (2011); 7 = Shailaja, S., Srikantu, J. (2013); 8 = Hancı, V., et al. (2013); 9 = Helfman et al. (1991); 10 = Yu, S. et al. (2013); 11 = Burgdorff, A. (2018); 12 = Landoni, G., et al. (2010); 13 = Hashemian, A., et al. (2018); 14 = Li, Z., et al. (2019); 15 = Bucher, J., Koyfman, A. (2015)

Fentanyl thetic Opio Agonist Blunts Sympathet Response via Mu Receptor Antagoni

Methods

Sympathetic Response the Direct Laryngoscopy as well as disturbances to cardiac rhythm.

Consequences

- to 40% of critically ill patients (Hashemian et al., 2018).
- Ο and possible death (Vaishnav & Chaudhari, 2016).

• Search

- Data collection began in September of 2020.
- Search results include the years 1991-2020.
- There was no limit on country of origin for our study.
- The MeSH terms were "adult surgical patients," "esmolol,"
- "fentanyl," and "hemodynamic."

Selection Sources of Evidence

- Studies measuring the efficacy of Fentanyl and/or Esmolol in tracheal intubation were included.
- A synthesis table was created to assure the studies were applicable and met criteria.
- medical practices and dosages.
- Fifteen articles were chosen for this review

• Data Charting Process

- Author's names, year of publication, journal, study title, study
- each source.

Data Items

- status.
- O Additional data items: type of surgery, medication received (esmolol or fentanyl), medication dose, time of medication administration, baseline hemodynamics, time of induction, presence of adverse postoperative outcomes.
- were collected and documented.

• Characterized by an increase in heart rate and/or blood pressure,

 Sympathetic response to endotracheal intubation may occur in up Patients suffering from cardiovascular disease and coronary artery disease may experience decreased ventricular filling, increased peripheral vascular resistance, myocardial ischemia,

blunting the hemodynamic response to direct laryngoscopy and

Articles were omitted due to time frames, which included outdated

location, article type, methodology used, outcome assessed, population, and specific results for each study were extracted. • The information was then placed into a table and organized from

• This table was available for reference throughout the study review.

Data items: patient age, gender, race, medical history, and ASA

hemodynamic response (illustrated by changes in heart rate or blood pressure), presence of adverse intraoperative outcomes, and

Qualitative data: increase, decrease, or no change in HR and BP

Results

The evidence supports statistical significance for the support of the effectiveness of Esmolol in attenuating the hemodynamic response

- Seven articles supported Esmolol has more significant decrease in heart rate and/or blood pressure than Fentanyl
- Both level IV studies supported Esmolol compared to Fentanyl Ο

□, □, —, NE, NR, □ (select symbol and copy as needed)	I.	2	3	4	5	6	7	8	9	10	н	12	13	14	15
Outcome #I Esmolol BP control	↑b	¢	↓b	↓c	↑c	↓b	↓c	↓b	↓b	↓b	↓b	↓b	NE	↑b	¢¢
Outcome #2 Fentanyl BP control	↓c	√c	↓b	¢¢	↑b	↓c	NE	—ь	↓b	NE	NE	NE	↑b	NE	NE
Outcome #3 Esmolol HR control	↑c	¢	↓b	↓c	↓b	↓c	↓b	↓b	↓b	↓b	↓b	↓b	NE	↑b	—ь
Outcome #4 Fentanyl HR control	↓b	√c	↓b	¢¢	¢¢	¢	NE	—ь	—ь	NE	NE	NE	—ь	NE	NE
Outcome#5 Fentanyl and Esmolol combined HR control	NE	NE	NE	¢	NE	NE	¢	NE							
Outcome #6 Fentanyl and Esmolol	NE	NE	NE	↓c	NE	NE	↓b	NE							

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↑ = Increased, \downarrow = Decreased, — = No Change, NE = Not Examined, NR = Not Reported, \checkmark = applicable or present a = higher-level evidence; b = statistically significant findings; c = not statistically significant

Implications for Practice

Indicates utilization of Esmolol is effective in attenuating the sympathetic nervous system response during direct laryngoscopy

• Standard of care

- Allowing safer practices
- Providing better patient outcomes Ο
- Avoiding intraoperative risk factors from sympathetic nervous
- system stimulation such as stroke and heart attack

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• All level I studies support effectiveness of Esmolol

Only two articles provided statistical evidence supporting Fentanyl in attenuation of hemodynamic effects during induction

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