Intubating LMA vs. Standard LMA: Equally Easy to Learn and Use for Inexperienced Operators

The lack of airway protection with the standard laryngeal mask airway (LMA) has limited its utility as a rescue device in the ED or EMS setting. Because it facilitates intubation, the intubating LMA (I-LMA) may solve this problem. To compare the adequacy of ventilation and speed of insertion of the I-LMA and the LMA, these authors timed insertion of the devices by 24 surgeons without anesthesia experience.

After minimal training (2 successful mannequin insertions), the participants placed the I-LMA and LMA, in random order, in 75 patients undergoing elective surgery. Median time from picking up the device to the start of ventilation was similar, at 23 seconds with the I-LMA (range, 9-120 seconds) and 24 with the LMA (range, 11-120 seconds; $P=0.27$). Placement led to successful ventilation in 98.7 percent of cases with both devices, after a maximum of 2 attempts. Using subjective and objective measures, nonblinded investigators judged that the I-LMA provided better ventilation ($P=0.009$) and less airway leakage ($P < 0.001$). Participants' preferences for the devices were not statistically different.

Comment: The I-LMA may be a useful rescue device, particularly in the hands of inexperienced operators. This study demonstrates an ease of insertion that compares favorably to that with the LMA. However, the important second step of I-LMA-facilitated tracheal intubation was not assessed. Prehospital or ED studies comparing this technique to endotracheal intubation and other rescue devices would be much more informative.

— RJ Vissers

Published in Journal Watch Emergency Medicine May 30, 2001

CITATION(S):