

# Anesthesia: Information for Patients



مؤسسة حمد الطبية  
Hamad Medical Corporation

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## What is Anesthesia?

The word anesthesia means 'loss of sensation'. These are some important things to know about anesthesia:

- It stops you feeling pain and other sensations
- It can happen in various ways
- Not all anesthesia makes you unconscious
- It can be directed to different parts of the body

Drugs that cause anesthesia work by blocking the signals that pass along your nerves to your brain. When the drugs wear off, you start to feel normal sensations again, including pain.

Anesthesia stops you from feeling pain during the operation or treatment. There are different types of anesthetic:

- A **local anesthetic** uses drops, sprays, ointments or injections to numb a small part of your body when the nerves can easily be reached. You stay awake but do not feel pain.
- A **regional anesthetic** uses an injection near to the bundles of nerves which carry signals from that area of the body to the brain to numb a larger or deeper part of your body (such as an arm or a leg). The most common regional anesthetics (also known as regional 'blocks') are spinal and epidural anesthetics. You stay awake but do not feel pain. Sedation may be used with a regional anesthetic. The regional or local anesthetic prevents you from feeling pain and the sedation makes you feel drowsy and mentally relaxed during the operation.
- A **general anesthetic** gives a state of controlled unconsciousness during which you feel nothing. This is essential for many operations and you will be asleep for the entire procedure. Anesthetic drugs injected into a vein, or anesthetic gases breathed into the lungs, are carried to the brain by the blood. A breathing tube will be put into your windpipe to help you breathe while under the anesthetic. The tube is removed as you wake up after surgery.

**Sedation** is the use of small amounts of anesthetic or similar drugs to produce a 'sleepy-like' state. It makes you physically and mentally relaxed during an investigation or procedure which may be unpleasant or painful (such as an endoscopy). You may remember a little about what happened or you may remember nothing.

**Anesthetists** are doctors who have had specialist training in anesthesia, in the treatment of pain, in caring for very ill patients (intensive care), and in emergency care (resuscitation).

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The anesthetist is responsible for your wellbeing and safety during your surgery and straight after your surgery, and together with you he/she will plan the type of anesthetic and pain control that is most suitable for you.

## Meeting Your Anesthetist

Your anesthetist will meet you before your operation.

Your anesthetist is responsible for:

- Assessing your health
- Discussing which anesthetic methods can be used with you
- Discussing the risks of suitable anesthetic options
- Agreeing a plan with you for your anesthetic
- Giving your anesthetic
- Planning your pain control with you

The choice of anesthetic depends on:

- Your operation
- Your answers to the questions you have been asked
- Your physical condition
- Your preferences and the reasons for them
- Your anesthetist's recommendations for you and the reasons for them
- The equipment, staff and other resources available

Having talked about the benefits, risks and your preferences you can then decide together what would be best for you.

## Questions You May Like to Ask Your Anesthetist

1. Who will give my anesthetic?
2. Do I have to have a general anesthetic?
3. What type of anesthetic do you recommend?
4. Have you used this type of anesthetic often?
5. Will I be unconscious and completely unaware during this kind of anesthetic?
6. What are the risks of this type of anesthetic?
7. Do I have any special risks?
8. How will I feel afterwards?

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## Before You Come Into Hospital

Here are some things you can do to prepare yourself for your operation and reduce the likelihood of difficulties with the anesthetic.

- **If you smoke** you should try to give up for several weeks before the operation. The longer you can give up beforehand, the better. Smoking reduces the amount of oxygen in your blood and increases the risk of breathing problems during and after an operation. If you cannot stop smoking completely, cutting down will help.
- **If you are very overweight** many of the risks of having an anesthetic are increased. Reducing your weight will help to reduce these risks.
- **If you have loose or broken teeth** or crowns that are not secure, you may want to visit your dentist for treatment before your operation. This is because the anesthetist may need to put a tube in your throat to help you breathe, and if your teeth are not secure they may be damaged.
- **If you have a long-term medical problem** such as diabetes, asthma or bronchitis, thyroid problems, health problems or high blood pressure (hypertension), you should request a check-up before your operation.

## Health Check Before a General Anesthetic

Before your anesthetic we need to know about your general health. At the pre-operative assessment clinic we will carry out a health check by asking you questions. You may also need to have some tests, such as an ECG, to make sure you are fit enough to have a general anesthetic.

## Medicines

Before a general anesthetic, we need to know about all the medicines that you take, including any inhalers or creams or off the shelf medicines.

You should continue to take your normal medicines up to and on the day of surgery, unless your anesthetist or surgeon has asked you not to or you have been told to stop by the nurse at your Pre-Operative Assessment visit.

If you take drugs to thin your bloods (such as warfarin, aspirin or clopidogrel, drugs for diabetes or herbal remedies) you will be given specific instructions about when to stop these at your Pre-Operative Assessment visit.

## Risk of Side Effects and Complications

The benefits of your operation need to be weighed against the risks of the anesthetic procedure and the drugs used. This will vary from person to person.

The risk to you as an individual will depend on:

- Whether you have any other illness
- Personal factors, such as whether you smoke or are overweight
- Whether you are having surgery which is complicated, long or being carried out in an emergency

## Side Effects

Most people have no problems after their operation and anesthetic. How you feel will depend on the type of anesthetic used and operation you have had, how much pain-relieving medicine you need and your general health.

However you may suffer from side effects of some sort in almost all treatments. Unpleasant side effects do not usually last long. Some are best left to wear off and others can be treated.

## Complications

Complications are unexpected and unwanted events that can develop because of that treatment. Examples would be an unexpected allergy to a drug or damage to your teeth caused by difficulty in placing a breathing tube.

You are encouraged to discuss any potential side effects or complications of anesthesia with the anesthetist during your Pre-Operative Assessment appointment or with the designated anesthetist when they see you before your operation.





**Patient and Family Education**

@ patienteducation@hamad.qa