The perils of post-op hypotension

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Patients undergoing non-cardiac surgery are susceptible to hemodynamic compromise. Most perioperative clinical care is consistent with a hypertension avoidance strategy (i.e., most patients continue their antihypertensive drugs before surgery and are quickly re-started on these drugs after surgery). Moreover, inhospital patients typically have vital signed checked every 4-8 hours, based on inefficient, antiquated, manual measurements. In this lecture attendees will gain an understanding of the frequency and location of hemodynamic compromise in the perioperative setting, acquire insights into potential thresholds, and learn about the POISE-3 Trial evaluating a hypotension avoidance strategy versus hypertension avoidance strategy.