## Are Muscle Relaxants Needed for Nasal Intubation in Propofol and Remifentanil Anesthesia?

Masatoshi Ide, DDS\*, Katsuhisa Sunada, DDS, PhD\*, Naohiko Katsuyama, DDS, PhD\*

Department of Dental Anesthesiology, The Nippon Dental University School of Life Dentistry, 1-9-20, Fujimi, Chiyodaku, Tokyo 102-8159, Japan

## Abstract

Purpose: The authors hypothesized that a muscle relaxant would have no meaningful difference in intubation conditions during nasal intubation under remifentanil and propofol anesthesia.

Materials and Methods: This parallel-group, double-blinded, randomized controlled trial included 44 patients who received saline (S group; n=22) or rocuronium (R group; n=22). In addition to remifentanil 0.5 µg/kg per minute and propofol 5 mg/kg per hour, propofol 0.5 mg/kg was administered until loss of consciousness. Nasal intubation was performed 10 minutes after administration of R or S 0.6 mg/kg. Significant differences in intubation conditions and salivary amylase levels before and after intubation were tested (P < .05).

Results: Vocal cord status (P=.003) and response to intubation or cuff filling (P=.008) were significantly different, but intubation conditions were not. Salivary amylase level was significantly lower with R administration (P=.022). No patient complained of postoperative throat pain and hoarseness.

Conclusion: Muscle relaxants during nasal intubation performed after bolus administration of propofol 0.9 mg/kg in addition to 10 minutes of remifentanil 0.5 µg/kg per minute plus propofol 5 mg/kg per hour are unnecessary.