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## Does obstructive sleep apnea patients be available for ambulatory surgery?

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The development of less invasive surgical techniques, economic factors, and patient preferences provided addition impetus to the popularity of ambulatory surgery. Improved equipment, training, evaluation of patients, discovery of better anesthetic agents are the main reasons why ambulatory anesthesia remains so safe in modern times. Obstructive sleep apnea (OSA) is the most commonly encountered form of sleep-disordered breathing as repetitive cessation in airflow during sleep with intermittent hypoxemia, daytime sleepiness, neurocognitive dysfunction, cardiovascular and pulmonary disorders. Most patients remain undiagnosed at the time of presentation for surgery. They are recommended preoperative assessment for OSA, a checklist of 12 items as a routine, a scoring system based upon the severity of OSA. They published practice guidelines for management of surgical patients with OSA for ambulatory surgery. These patients should not be discharged from the recovery area to an unmonitored setting until they are no longer at risk for postoperative respiratory depression, and recommended that upper abdominal procedures and airway procedures are not suitable for ambulatory setting. Otherwise the Society for Ambulatory Anesthesia (SAA) Consensus for patient with OSA evaluates the perioperative complications in ambulatory surgery. The preoperative factors that may influence the outcome (e.g., severity of OSA, coexisting medical conditions, and invasiveness of the surgical procedure) were assessed. This review has resulted in several recommendations that are contradictory to the ASA OSA guidelines. In contrast to the ASA guidelines the STOP-Bang screening questionnaire is preferred and does not support the ASA recommendations that upper abdominal procedures are not appropriate for ambulatory surgery. Currently in Mexico, the prevalence of overweight and obesity was 71.3%. It has been associated with difficult airway management and other disorders as OSA. According to ASA and SAA consensus the increased perioperative complications, the suitability of ambulatory surgery in patients with OSA remains controversial.

### Biography

Belia Garduno has extensive experience in handling ICU patient care in different areas and in difficult airway. Additionally, she is the Head of Resident training at the Hospital Universitario. Therefore, she emphasizes the detection of potential issues in the preoperative evaluation in order to strengthen two important areas: ambulatory surgery and OAS patients.

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