Preface

Anesthesia for Patients Too Sick for Anesthesia

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Guest Editors

By their very nature, surgical patients are “sick”—some more so than others. Anesthesiologists, however, are accustomed to creating a very low-risk environment for their patients. Hence, in the setting of *severe disease*, the anesthesiologist has a very powerful tendency to want to view such a patient as “too sick for anesthesia.” We believe that this viewpoint, while long-standing and deeply ingrained in traditional anesthesiology practice, is in conflict with a modern view of aggressive surgical care. Severe surgical disease necessitating urgent or emergency surgery often coexists with severe medical illnesses.

If anesthesiologists canceled every patient who presented with multiple comorbidities, our operating rooms would be empty. Indeed, it is because of our unique training and skill-set that we are in a position to care for these critically ill patients. The balance between underlying medical problems and the need to provide surgical therapy must include careful consideration of the risks and benefits. However, only with a comprehensive understanding of the underlying pathology and its effect on anesthesia can a decision be made to proceed with the surgery despite significant medical dangers. Hence we have created this volume entitled (only partially facetiously), “Anesthesia for patients [traditionally regarded as] too sick for anesthesia.”

We and our authors have focused on a group of common, but potentially severe, medical conditions in the environment of surgical disease in an effort to provide a guide and resource for the anesthesiologist to become more familiar with these medical problems.

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