Anaesthetic risk: Information sheet

Safety is the primary focus of your anaesthetic care. Overall anaesthesia is safe with a low risk of significant complications. Multiple precautions will be taken to reduce your risk of complications but these may not eliminate all risks. A comprehensive medical review prior to surgery is available by a specialist physician for selected patients.

If you have any specific concerns please discuss these directly with your anaesthetist. You will be contacted directly by your anaesthetist before your operation and will also have an opportunity to ask questions on the day. Following your operation your medical cares will be primarily coordinated by the surgical team, the acute pain team and a specialist physician as required. If any problems arise after your operation please raise your concerns any time to the nursing or medical staff attending to you. Your anaesthetist will be available as needed and may be contacted by the ward staff for any concerns or advice.

Below is a list which covers most of the important considerations relating to anaesthesia but is not fully comprehensive and does not include specific surgical risks

Common

Nausea (5-20%), drowsiness, dry mouth, sore throat (25%), sleep disturbance Pain on awakening - this will be treated immediately in the 'recovery room' Dizziness or lightheadedness

Low blood pressure or heart rate during the first 24-48 hours — (up to 30%) Urinary retention or inability to completely empty your bladder (10-15%)

Uncommon

Persistent *severe* pain on awakening or in the early postoperative period (~5%) Confusion, disorientation, and hallucinations are possible but not common (<5%) Dental injury (0.1%)

Eye abrasions or red painful eye (0.5%)

Postoperative DVT (blood clot in veins in the leg) or PE (blood clot in the lung) (0.65%)

Transient nerve dysfunction (~5%) - persistent numbness/tingling 24-48 hours

- This may occur as a result of surgery, anaesthesia (nerve blocks) or positioning

Rare

Airway emergency under general anaesthetic (1 in 5,000 to 1 in 10,000)

Aspiration of stomach contents into lungs causing pneumonia (1 in 3,000)

Bleeding into the leg related to nerve block injections which may require further imaging, surgery or blood transfusion (0.1%)

Accidental awareness of events during surgery when under 'general anaesthetic' (0.1%) Allergy to medications (1 in 800 to 10,000)

Permanent nerve injury resulting in sensory change, or weakness of related muscles (1 in 3000)

Permanent nerve injury due to spinal injection (1 in 24,000 to 1 in 54,000)

Infection of a nerve block catheter (1 in 1500)

Bleeding related to a nerve block catheter or injection (1 in 500)

Stroke, heart attacks and pneumonia are all rare but serious complications (<1%) Fat embolism syndrome (<1%)

- a rare complication related to bone drilling during joint replacement,
- may result in breathing difficulty, confusion or neurological complications similar to a stroke
 Death related directly to anaesthesia
- 3 per million population per annum or 1 in 60,000 procedures nationally