

## Untreated side effects from anesthesia during surgery cause permanent brain damage

In 2008, 34-year-old James Smith (not his real name) was well on the road to recovering from a 2005 automobile accident that had resulted in a severe degeneration of his hips. Despite the injury, he was active, living independently, and running his own videography business. To improve his mobility and alleviate pain, James decided to have both hips replaced. On the day of his first surgery, the local hospital's anesthesiologist ordered a cocktail of drugs for James – Propofol to induce and maintain general anesthesia; midazolam (Versed) for preoperative sedation; and tetracaine, a local anesthetic. These drugs would paralyze his lower extremities and put him into a deep sleep, but he would need to continue breathing on his own. The combination of these medications has serious side effects which require medical personnel to exercise great care in their use and close monitoring of the patient's vital signs. One of the side effects is "sympathetic blockade," a condition that can cause a rapid and severe drop in blood pressure and possible cardiac arrest. To further complicate matters, James suffered from sleep apnea, a condition which causes a person to stop breathing while they are sleeping. This condition requires even greater care and attention in the use of anesthetic medications.

James survived the first hip surgery. The next day, however, he was in immense pain. As medical personnel began to administer the same anesthetics they used previously, James told them that he could not breathe. Instead of taking immediate action to provide respiratory relief, the nurses and doctors simply said to James, "Keep breathing." The monitors showed a rapid decline in his blood pressure. Again, the medical personnel took no immediate action. Finally realizing the situation had become serious, they called

for ventilatory support but more delays followed. James suffered both respiratory and cardiac arrest. The code team managed to bring him back to life with external shocks, but in the eight minutes he was without oxygen he suffered permanent brain damage. In critical condition in the hospital's intensive care unit, James suffered even further respiratory crises when nurses failed to properly determine when the patient should have been extubated.

Ultimately, James survived the ordeal, but with severe impairment. Due to the anoxic brain injury, he has very limited short-term memory and suffers from cognitive defects and severe personality changes. Unable to appreciate dangers

or properly look after himself, he requires close supervision and attention. He cannot drive and has not worked since the incident. He lives with his parents. The parents retained SDSBS attorneys **Chris Searcy** and **Sia Baker-Barnes** to prosecute an action on their son's behalf. Because the anesthesiologist was a medical director at the hospital and its exclusive provider of anesthetic services, the attorneys held both hospital and



doctor responsible for negligent conduct. Through thorough preparation, the attorneys were able to reconstruct the sequence of events that led to James' injuries, despite poor recordkeeping at the hospital. The defense argued for several years, opining that James was at fault for failing to tell the medical staff that he had sleep apnea. In an intense deposition of the anesthesiologist, Ms. Baker-Barnes forced the doctor to admit that he never asked James about sleep apnea, nor recorded anything regarding whether or not the condition existed. Just weeks before trial, the case was settled for a confidential sum. James' family is comforted that he will now be able to receive the medical and supportive care he will need for the rest of his life. ♦