## **Challenges in Magnetic Resonance Imaging Anesthesia Findings and Recommendations**

Hakan Gökalp Taş®

Department of Anesthesiology and Reanimation, Erzincan Binali Yıldırım University Faculty of Medicine, Erzincan, Turkey

Cite this article as: Taş HG. Challenges in magnetic resonance imaging anesthesia findings and recommendations. *Current Research in MRI*, 2024;3(1):33-34.

Corresponding author: Hakan Gökalp Taş, e-mail: hakangokalptas@hotmail.com

Received: January 30, 2024 Revision Requested: February 7, 2024 Last Revision Received: February 7, 2024 Accepted: February 17, 2024

**Publication Date:** March 21, 2024 DOI:10.5152/CurrResMRI.2024.24093



Content of this journal is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.

To the Editor,

Nowadays, the number of magnetic resonance imaging (MRI) centers is growing daily as a result of technological advancements, the growing number of MRI centers, and the growing importance of MRI in diagnosis and treatment due to its improved quality and accessibility. The number of patients requiring anesthesia rises along with the demand for MR imaging. This letter aims to highlight the difficulties associated with anesthesia during magnetic resonance imaging.

Challenges regarding the physical location of the MRI device:

The MRI unit provides particular challenges because it is usually located outside of the operating room, requires specialist equipment of its own, and takes longer to prepare than a standard surgery.<sup>1,2</sup>

Communication challenges:

The existence of teams that do not collaborate frequently, the darkness of the room, the distance between the patient and the doctor, the loud noise level drowning out other devices' sounds and making them difficult to hear, and other factors are the causes of communication issues.<sup>3,4</sup>

Environmental risks and challenges:

Even heavy items, such as oxygen or nitrous oxide tanks, could unintentionally shoot projectiles into the scanner's bore due to the powerful static magnetic field.<sup>4,5</sup> In addition to heating tissue or devices, radiofrequency energy can create current in conductors including fluid-filled tubing, equipment cables, and electrocardiogram (ECG) leads.<sup>4</sup> Strong magnetic fields and radiofrequency radiation can produce artifacts that make it more difficult to interpret pressure waveforms or ECGs clinically.<sup>6</sup>

An evaluation of all of them reveals that anesthesia during MRI is now a method with its own inherent dynamics, requiring skill and cautious execution.

Peer-review: Externally peer-reviewed.

Declaration of Interests: The author has no conflict of interest to declare.

Funding: The author declared that this study has received no financial support.

## REFERENCES

- 1. Deen J, Vandevivere Y, Van de Putte P. Challenges in the anesthetic management of ambulatory patients in the MRI suites. *Curr Opin Anaesthesiol*. 2017;30(6):670-675. [CrossRef]
- 2. Boggs SD, Barnett SR, Urman RD. The future of nonoperating room anesthesia in the 21st century: emphasis on quality and safety. *Curr Opin Anaesthesiol*. 2017;30(6):644-651. [CrossRef]
- 3. Berkow LC. Anesthetic management and human factors in the intraoperative MRI environment. *Curr Opin Anaesthesiol.* 2016;29(5):563-567. [CrossRef]
- 4. Wilson SR, Shinde S, Appleby I, et al. Guidelines for the safe provision of anaesthesia in magnetic resonance units 2019: guidelines from the Association of Anaesthetists and the Neuro Anaesthesia and Critical Care Society of Great Britain and Ireland. *Anaesthesia*. 2019;74(5):638-650. [CrossRef]

- American Society of Anesthesiologists Task Force on Intraoperative Awareness. Practice advisory for intraoperative awareness and brain function monitoring: a report by the American society of anesthesiologists task force on intraoperative awareness. *Anesthesiology*. 2006;104(4):847-864. [CrossRef]
- Schroeck H, Welch TL, Rovner MS, Johnson HA, Schroeck FR. Anesthetic challenges and outcomes for procedures in the intraoperative magnetic resonance imaging suite: a systematic review. *J Clin Anesth*. 2019;54:89-101. [CrossRef]