

## Etomidate and rapid sequence intubation

### To the editor:

Etomidate offers the most favourable safety profile of currently available induction agents for emergency department (ED) rapid sequence intubation (RSI).<sup>1,2</sup> Although it is effective and widely used in the US, there are few reports of its use in Canadian EDs, largely because it is not currently available on the Canadian market.

Lions Gate Hospital is a 240-bed community hospital and trauma receiving centre in North Vancouver, BC, that has 45 000 ED visits per annum. We recently reviewed our 3-year eto-

midate experience, documenting intubation success, hemodynamic changes, adverse effects and ED staff satisfaction. Between Nov. 15, 2001, and Oct. 15, 2004, we used etomidate in 169 RSIs, with a 100% intubation success rate. The most common side effects were myoclonus (occurring in 7 [4.1%] patients) and vomiting (1 [0.6%] patient). ED staff reported a high level of satisfaction.

Etomidate is a safe and effective induction agent for RSI in the ED. Its use should be expanded in Canadian community hospitals. Etomidate can be obtained through Health Canada's Special Access Program at: [www.hc-sc.gc.ca/hpb-dgps/therapeut/htmleng/edrp.html](http://www.hc-sc.gc.ca/hpb-dgps/therapeut/htmleng/edrp.html).

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### References

1. Yeung JK, Zed PJ. A review of etomidate for rapid sequence intubation in the emergency department. *Can J Emerg Med* 2002;4(3):194-8.
2. Zed PJ, Abu-Ladan RB, Harrison DW. A prospective study to evaluate intubating conditions and hemodynamic effects of etomidate for rapid sequence intubation in the emergency department [abstract]. *Can J Emerg Med* 2004;6(3):176-7.

Letters will be considered for publication if they relate to topics of interest to emergency physicians in urban, rural, community or academic settings. Letters responding to a previously published *CJEM* article should reach *CJEM* head office in Vancouver (see masthead for details) within 6 weeks of the article's publication. Letters should be limited to 400 words and 5 references. For reasons of space, letters may be edited for brevity and clarity.

Les lettres seront considérées pour publication si elles sont pertinentes à la médecine d'urgence en milieu urbain, rural, communautaire ou universitaire. Les lettres en réponse à des articles du *JCMU* publiés antérieurement devraient parvenir au siège social du *JCMU* à Vancouver (voir titre pour plus de détails) moins de six semaines après la parution de l'article en question. Les lettres ne devraient pas avoir plus de 400 mots et cinq références. Pour des raisons d'espace et par souci de concision et de clarté, certaines lettres pourraient être modifiées.