

Letter from the Editors

Dear colleagues,

The uninterrupted and continuous presence of the *Greek e-journal of Perioperative Medicine* in the scientific literature, over last 17 years, has been gradually increased and this is attributed to your help. On behalf of the editorial board, we would like to emphasize that our goal is ensure free-access, high quality, published articles in the area of medical press and we would like to thank you again for this continuous support. This is the third (3rd) issue of the year and our goal is to raise the issues from three to four per year. The participation of all of us with high quality publications will enable our journal to continue to be part of international libraries.

The present issue covers a wide area of interests. The review article of Schizodimos et al summarizes the major pathogenetic mechanisms, the clinical manifestations and the monitoring techniques of intracranial hypertension. They refer to 2016 Guidelines for the Management of Severe Traumatic Brain Injury, where a measured ICP above 22 mmHg is considered an indication for intervention. They also describe the major pathogenetic mechanisms of intracranial hypertension (venous occlusion, increased cerebral volume, increased blood volume, mass effect cerebral edema). Additionally, new techniques are described which are suggested as alternatives to intraventricular catheters of ICP monitoring. In the next article, Papagiannopoulou et al. cover a completely different theme, as they focus on pediatric anesthesia. Their work alerts clinicians about the possible estimation error of body estimation and endotracheal size prediction formulas used in pediatrics.

The following study of Nikolaidou et al. presents selected data for the use of emergency care service by the refugees' camps around Thessaloniki (Northern Greece), during a 6 months period. The study shows increased transport during the first 3 months of the study, followed by a steady decrease. A high incident of pediatric and trauma cases was noted with equally high rates of crime-related injuries and pregnancy-related problems. The authors emphasize that more studies are needed to evaluate the use of the health system due to the complexity of the problem and the dynamic nature of the camps' population composition.

The next article of Sifaki et al focuses on the anesthetic management of a patient with Myasthenia Gravis who underwent abdominal surgery. Anesthesia and myasthenia gravis is challenging combination due to the great risk of perioperative complications. The authors showed that the combination of general and epidural anesthesia was effective reducing neuromuscular blocking agents and opioids consumption. They also demonstrated that the use of Sugammadex, a rocuronium-induced neuromuscular blockade, in combination

with neuromuscular monitoring, can be applied to reverse neuromuscular blockade in patients with myasthenia gravis.

Our final article Lolakos K et al describes a Pacemaker Syndrome in a patient who underwent Coronary Artery Bypass Grafting. This syndrome occurred after the placement of the electrodes of temporary epicardiac ventricular pacing with significant decrease in systemic arterial pressure and appearance of cannon A waves on central venous pressure (CVP), tracing every time the pacemaker was triggered. A literature review is also elaborated by the authors concerning the Pacemaker Syndrome.

We hope you enjoy this issue of the *Greek e-journal of Perioperative Medicine*.

Finally we want to wish happy New Year to all of you.

Editors-in chief

Mouloudi Eleni

Papagiannopoulou Pinelopi