

COVID Study by Dr Bamgbade and Salem Pain Clinic Canada; Risk and Challenges of Endotracheal Airway Care During Pandemic

Clinical Report by Dr Olumuyiwa Bamgbade; Highlights the Challenges and Risks of Endotracheal Airway Care During COVID-19 Pandemic

SURREY, BC, CANADA, November 30, 2022 /EINPresswire.com/ -- A clinical scientific report has

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COVID-19 respiratory pandemic is a major concern; concerted multimodal approach will reduce the risk of viral spread during airway management" Dr Olu Bamgbade highlighted the risks and challenges associated with tracheal extubation during the COVID-19 pandemic. The important and cautionary case report was authored by Dr. Olumuyiwa Bamgbade of the Salem Anaesthesia Pain Clinic in Surrey, British Columbia, Canada.

Dr. Olumuyiwa Bamgbade is an anesthesiologist, assistant professor, and specialist interventional pain physician who trained in Nigeria, Britain, USA, France and South Korea <u>Profile</u>. Dr. Bamgbade is the medical director of the Salem Anaesthesia Pain Clinic, a specialist interventional pain

clinic, and research center <u>SalemClinic</u>. The interesting scientific report was published in the Journal of Taibah University Medical Sciences <u>JTUMED</u>.

Tracheal intubation and extubation are aerosol-generating medical procedures (AGMP), and have become of greater concern during the COVID-19 pandemic. Tracheal extubation generates detectable aerosol at 15-fold greater spread than intubation, especially during coughing. The management of AGMP is more challenging and delicate during the COVID-19 respiratory pandemic; because of the increased risk of infection transmission to medical staff, vulnerable patients and the clinical environment. Despite the high air exchange rates in most medical units, tracheal extubation may potentially spread COVID-19 or other respiratory viruses into the clinical environment.

"The risk of AGMP-related viral dissemination must be mitigated, especially during tracheal extubation. Medical staff must utilize personal protective equipment, including face-shields. During tracheal intubation of COVID-19 patients, videolaryngoscopy must be employed instead of direct laryngoscopy to reduce proximity to the patient's airway and aerosol source," said Dr.

Bamgbade. "Coughing or other complications of airway management should be minimized by timely efficient airway suctioning, optimal sedation techniques, intravenous lidocaine and intravenous magnesium. Tracheal extubation during simultaneous continuous endotracheal suctioning would significantly minimize airway secretions, coughing, aerosol generation and viral dissemination," explained Dr. Bamgbade. "The COVID-19 respiratory pandemic remains a major medical concern; and concerted multidisciplinary team efforts must continue towards reducing the risk of viral spread during airway management. This is essential to minimize AGMPrelated viral spread, and to protect clinical staff and patients," advised Dr. Bamgbade.

Based in Surrey, British Columbia, Canada, Salem Anaesthesia Pain Clinic is a specialist interventional pain clinic and research center that provides multimodal pain management, interventional pain treatment, substance misuse therapy, insomnia



Dr Olu Bamgbade

treatment, and preoperative optimization therapy. Dr. Olumuyiwa Bamgbade is an anesthesiologist, assistant professor, specialist interventional pain physician and the medical director of the Salem Anaesthesia Pain Clinic. For further information; salem.painclinic@gmail.com.

Olumuyiwa Bamgbade Salem Anaesthesia Pain Clinic +1 778-628-6600 salem.painclinic@gmail.com Visit us on social media: LinkedIn

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