**CO10   Anxiolytic preanaesthetic medication in Portugal: a survey of current practice**

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Background: Excessive preoperative anxiety is associated with increased postoperative complications,1 but there are no clear guidelines for preoperative anxiolysis. Anxiolytic preanaesthetic medication with midazolam has been a common practice for the last decades,2 but portuguese data are unknown. We aim to evaluate the present practice of preoperative anxiety assessment and sedative-anxiolytic medication in Portugal and the role of midazolam in modern practice.

Methods: A cross-sectional online survey of portuguese anaesthesiologists regarding their current anxiolytic premedication practice was available between 14th July and 17th October 2022. Links were sent to all anaesthesiology departments in the country. The survey included 9 sections with 37 multiple choice questions. Statistical analyses were performed using IBM®

SPSS® (version 26), data presented as n (%) or mean ± SD, and groups compared using Chi-square test, T-test or one-way ANOVA.

Results: We analysed 297 questionnaires (response rate of 16%); mean age of respondents was 41 ± 11 years, 204 (69%) were women, working mostly in public hospitals. Most respondents do not objectively evaluate anxiety but report to adjust medication to patient anxiety level. Globally, only 9 (3%) respondents report to never use premedication in any setting, and 42 (14%) to never use midazolam; 138 (46%) use non-pharmacologic strategies to manage anxiety. Besides providing information, the most common non-pharmacologic strategies are cognitive behavioral therapy, using videos or games, and music therapy. Among the prescribers, 186 (79%) report that midazolam is the preferred drug in the outpatient setting, 165 (59%) in the inpatient setting and 151 (84%) in the paediatric setting; second most used drugs are other benzodiazepines, and we found significant regional differences. Most anaesthesiologists premedicate adult patients in the holding area through an intravenous route or orally the night before; and paediatric patients orally in the ward. Only 42 (14%) report to have anxiolytic premedication protocols in their department for ambulatory surgery, 58 (20%) for inpatient surgery and 70 (24%) for paediatric anaesthesia. 202 respondents (68%) do not have or are not aware of any anxiolytic premedication protocol in their department. Midazolam is the most common protocol drug in all settings.

Conclusions: Midazolam remains the most used anxiolytic preanaesthetic medication among portuguese anaesthesiologists in all operative settings, although there are regional differences and only a minority of anaesthetists routinely perform an objective and standardized evaluation of anxiety. Most respondents are not aware of protocols in their departments. We recommend that anaesthesiology societies develop clear guidelines about the evaluation, registry and management of preoperative anxiety, proposing a short quantitative anxiety scale and recommendations about both non-pharmacologic and premedication strategies.

1.Curr Opin Anaesthesiol. 2022; 35: 674-8.

2. Anesth Analg. 1997; 84: 427-32.

