# Intersection of Anesthesia and Climate Crisis

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## **Impact of Climate Change on Human Health** Asthma, Injuries, fatalities,

mental health impacts

cardiovascular disease

**Heat-related illness** and death, cardiovascular failure

Severe Weather

Air **Pollution** 

> Changes in Vector **Ecology**

Malaria, dengue, encephalitis, hantavirus, Rift Valley fever, Lyme disease, chikungunya, **West Nile virus** 

Forced migration, civil conflict, mental health impacts

Environmental **Degradation** 

**Extreme** 

Heat

**Increasing Allergens** 

Respiratory allergies, asthma

**Water and Food Supply Impacts** 

Water **Quality Impacts** 

Malnutrition, diarrheal disease

Cholera, cryptosporidiosis, campylobacter, leptospirosis, harmful algal blooms



# emissions by region

# Healthcare sector

#### **GHG** emissions by region

## **United States (c)**

8% of national emissions

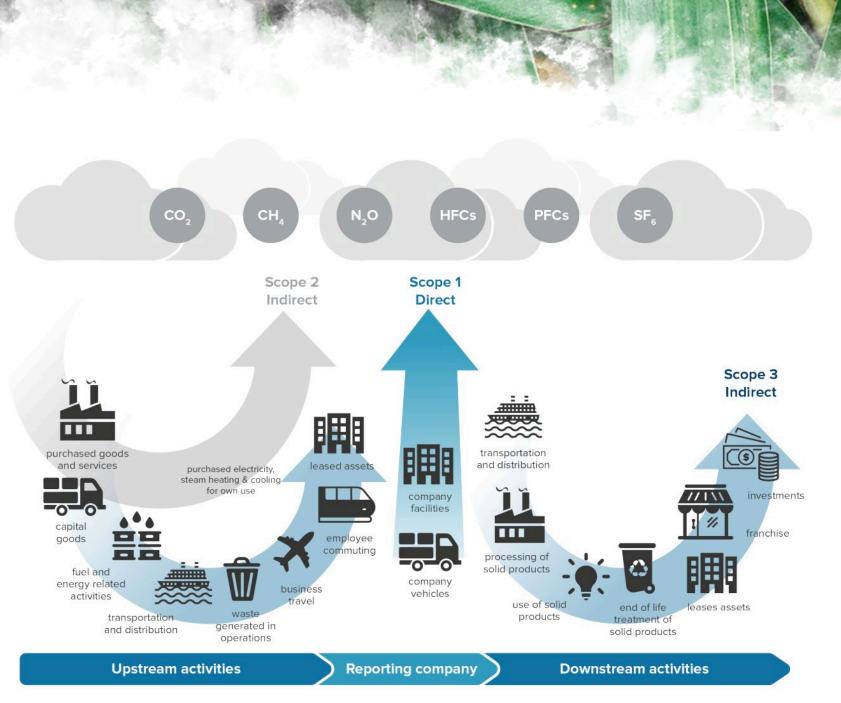
## Canada >

4-6% of national emissions



North America	Latin America & Caribbean	East Asia Pacific	South Asia	Europe & Central Asia	
1.65	0.20	0.26	0.03	0.43	tCO <sub>2</sub> e/capita
0.58	0.13	0.60	0.05	0.39	GtCO <sub>2</sub> e total
29	6	30	2	19	% global

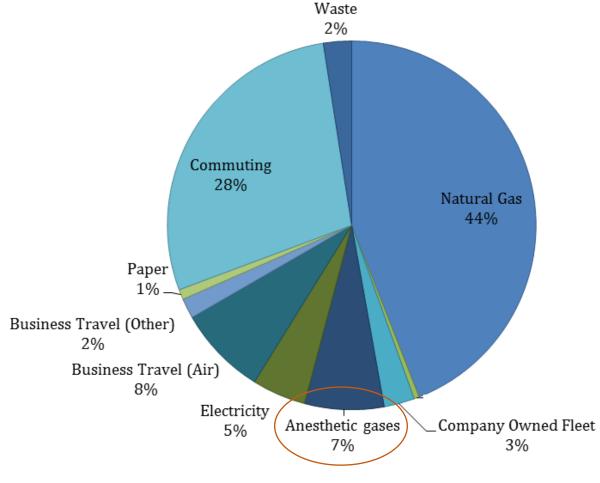
Figure 9: Estimated health care emissions for World Bank regions other than Sub-Saharan Africa and Middle East and North Africa

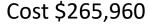


# Types of emissions

# Seattle Children's Main Hospital 2018 emissions

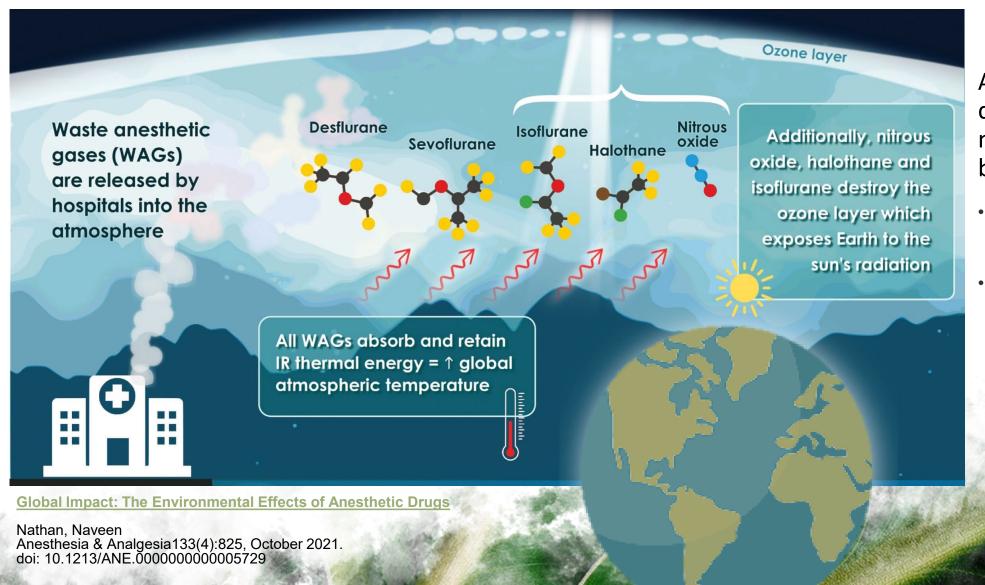
# FY 2018 GHG Inventory 22,069 mt CO2e







# **Anesthetic Agents**

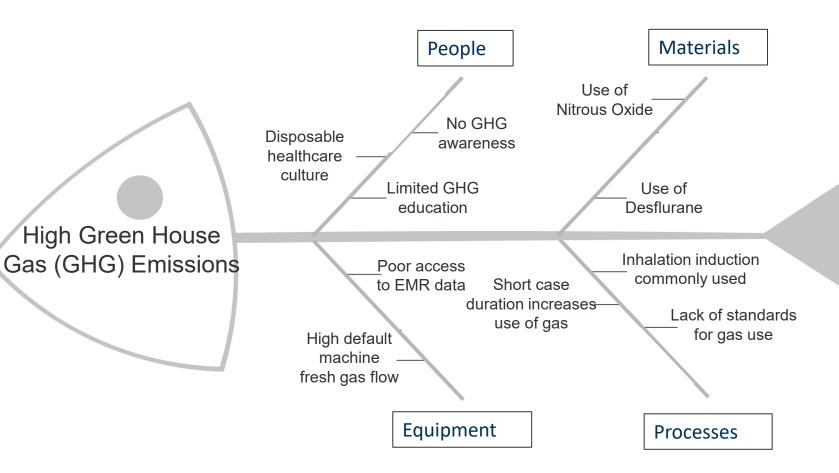


Approximately 5% of delivered anesthetic metabolized by patient

- Rest is vented to atmosphere
- Not scavenged (technology in development)



## PROBLEM



**CAUSES** 



# What's Known: We Can Reduce Impact

- Eliminate Desflurane
- Eliminate or drastically reduce use of nitrous oxide
- Reduce fresh gas flows during induction and maintenance (decision support alerts)
- Utilize total IV anesthesia TIVA
- IV inductions when clinically feasible
- Provide near real-time feedback on emissions

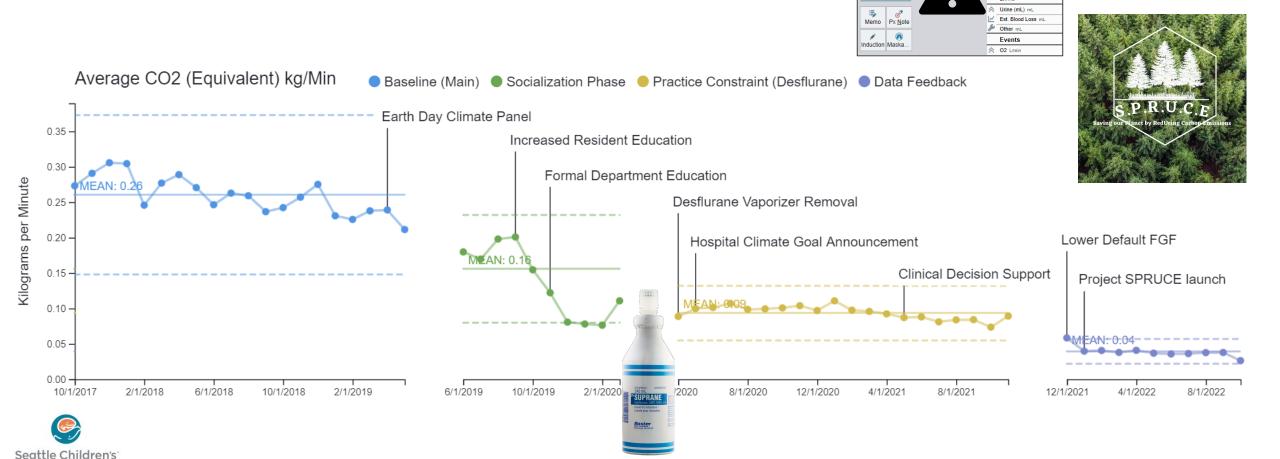


# Main hospital Emissions

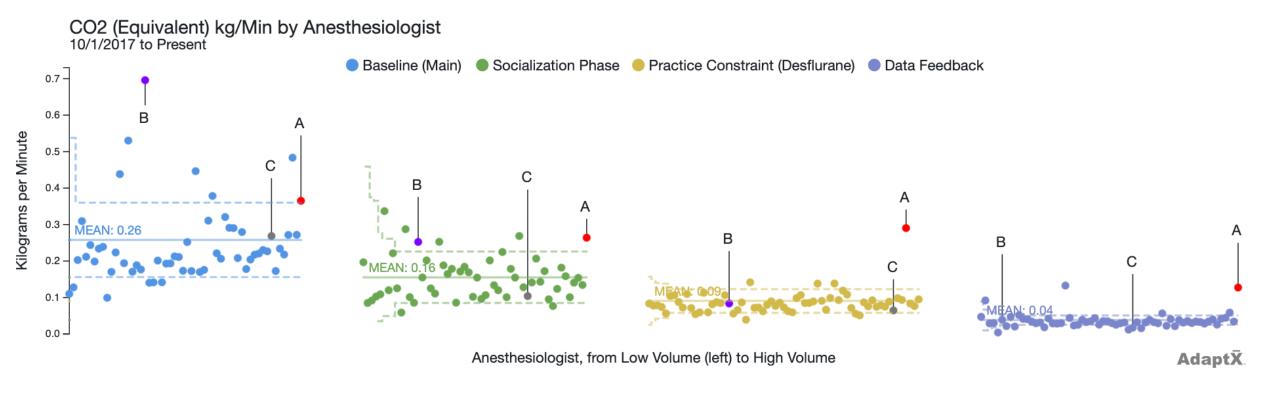
Macro Meds

Meds

Blood Cell Sa.



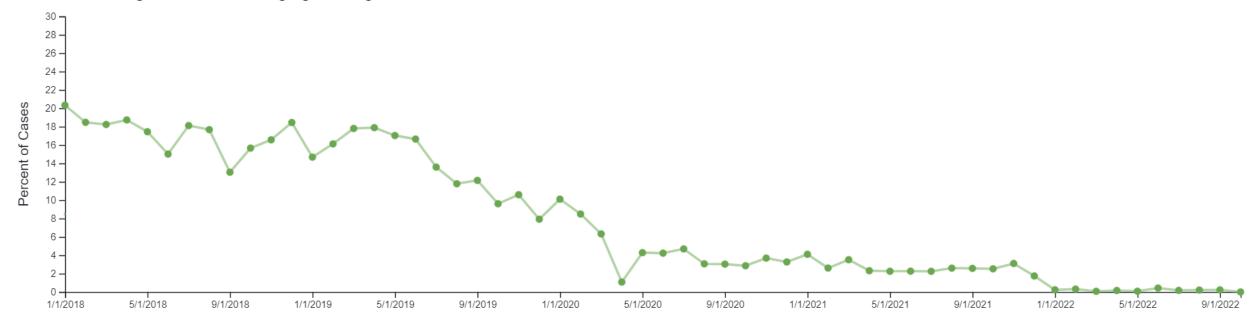
# Emissions decreasing over time, by anesthesiologist





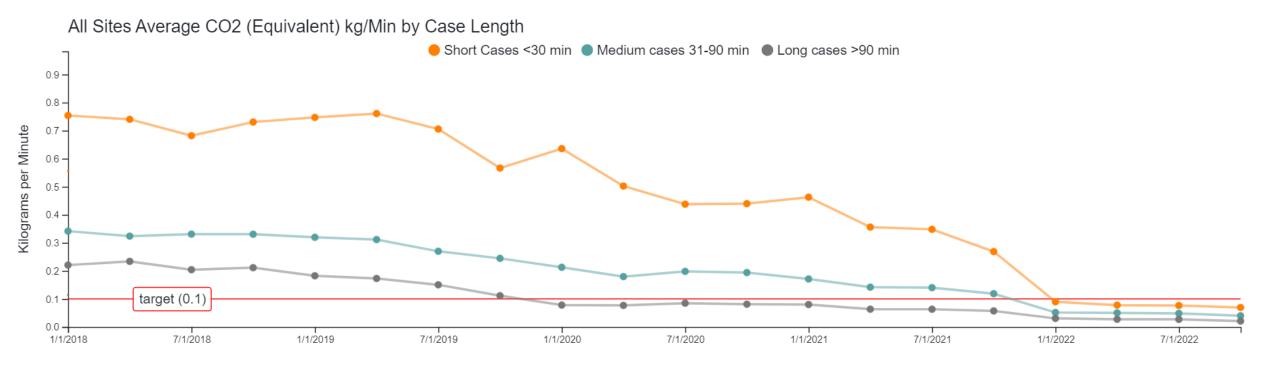
# High emissions cases trending down

#### Percentage of Cases averaging >0.5 kg CO2e/min



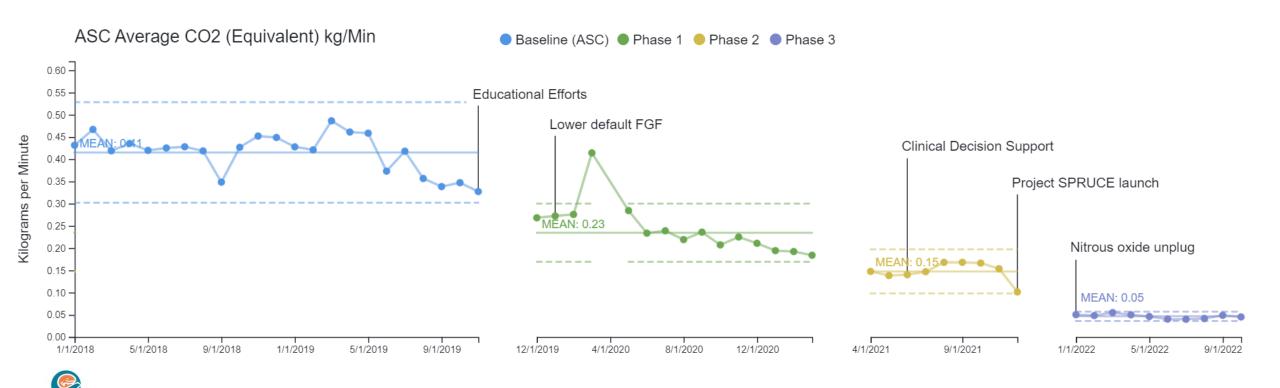


# Reduction of emissions for all case lengths



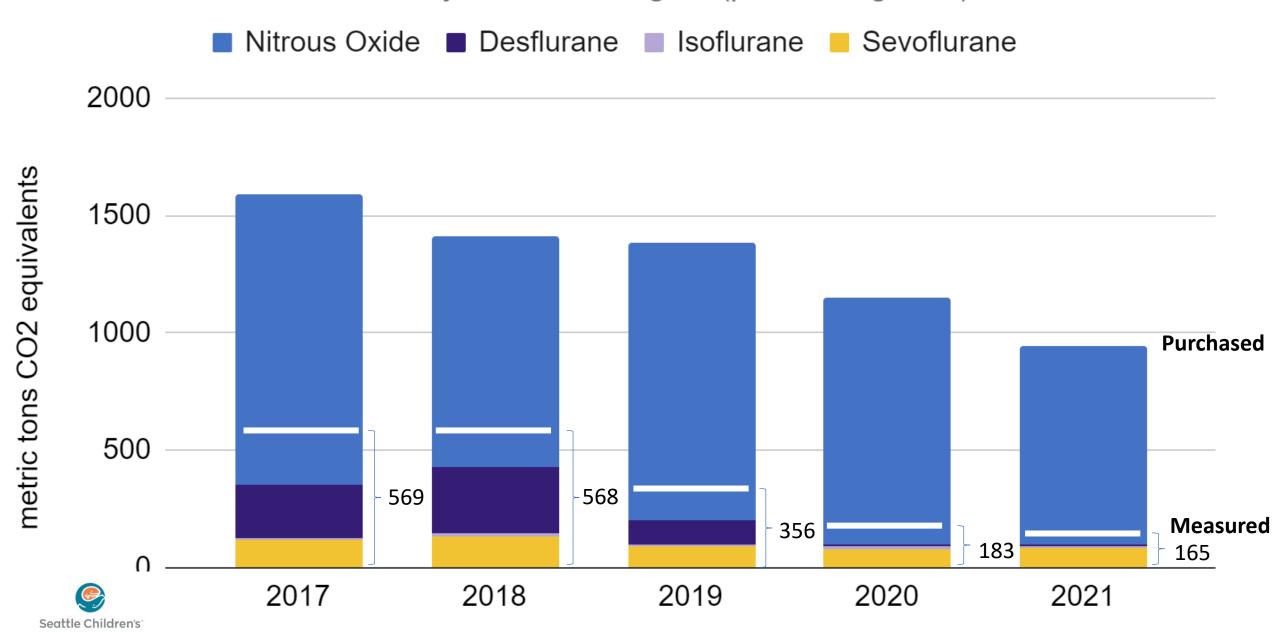


# Emissions at the ASC



Seattle Children's

## Greenhouse Gas Emissions by Anesthetic Agent (purchasing data)



# Where is the nitrous oxide going?



### Non-OR uses

Dental clinic

Mobile Sedation team

Emergency Department

Cardiac ablations/Cath lab



## Leaks

At central supply
Connections at pipes



### British Journal of Anaesthesia

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Correspondence

Discrepancy between procurement and clinical use of nitrous oxide: waste not, want not

Richard Seglenieks 1, 2 A M, Angela Wong 1, Fiona Pearson 3, Forbes McGain 1, 2, 4



# Thank you!

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- Kimberly Righter-Foss
- Jen Chiem
- Dan Low
- Lynn Martin

## **Informatics**

- Amber Yun
- AdaptX team

## **Surgical Colleagues**

- Sarah Greenberg
- Hannah Cockrell

## **Sustainability**

- Mike Bigelow
- Colleen Groll



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