If a similar goal-directed approach had been applied in the Basel study [1], the administration of lower doses of propofol would (likely) have been associated with less cardiopulmonary compromise, particularly among the high-risk patients. Over recent years, propofol has emerged as a ‘near ideal’ sedative drug with dose-dependent hypnotic effects, rapid onset and a fast recovery profile [7]. So, please, do not throw the baby out with the bath water.

More studies in collaboration with anesthesiologists might benefit to our patients making procedural sedation and analgesia safer, comfortable and cost-effective.

Financial Disclosure and Conflicts of Interest

The authors have no conflicts of interest to declare.

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