

Abstract

Background: Difficult Intubation is just a significant cause of mortality and morbidity relate to the Anesthesia. We decided to evaluate the value of Mallampati score, Upper Lip Bite Test and Facial Angle in prediction of difficult intubation.

Methods: In a prospective descriptive study, data from 132 patients candidate for elective maxillofacial surgeries under general anesthesia were gathered. Facial Deep Angles were measured by maxillofacial surgeon according to the cephalometry. An anesthesiologist evaluated the modified mallampati score and Upper Lip Bite Test and another anesthesiologist evaluated Cormack and Lehane score during the Intubation . Grade 3, 4 were defined as difficult Intubation. Sensitivity, specificity, positive predictive value, negative predictive value and Youden index were determined for all tests.

Results: Difficult Intubation was reported in 12% of the patients. Facial Angles $\leq 82.5^\circ$ can predict difficult intubation with 87.5% sensitivity and 88.8% specificity. Among three tests, Modified Mallampati Score was of highest specificity (94.5%) and Modified Mallampati Score and facial angle of highest sensitivity (87.5%). The highest NPV, sensitivity and Youden index were observed when using facial angle with modified mallampati score or with Upper Lip Bite Test.

Conclusions: Facial deep angle has a high sensitivity, NPV and Youden index for prediction of difficult intubation, but the best way for prediction of difficult intubation is the combination of Facial Angle with one of the Modified Mallampati Score or Upper Lip Bite Test.

Keywords: Difficult intubation, Modified Mallampati Score, Upper lip bite test, Facial Angle