Anesthesia recommendations for patients suffering from

Hallermann-Streiff syndrome

**Disease name:** Hallermann-Streiff syndrome

**ICD 10:** -

**Synonyms:** Francois dyscephaly syndrome, oculo mandibulo dyscephaly

Cardinal features of this syndrome are dyscephaly with bird facies, frontal/parietal bossing, dehiscence of sutures with open fontanellae, hypotrichosis of scalp, eye brows and eye lashes, cutaneous atrophy of scalp and nose, microphthalmia, congenital cataracts, blue sclera, nystagmus, mandibular hypoplasia, forward displacement of temporomandibular joints, high arched palate, small mouth, multiple dental anomalies and proportionate small stature.

Find more information on the disease, its centres of reference and patient organisations on Orphanet: [www.orpha.net](http://www.orpha.net)
Typical surgery

Ophthalmic surgeries (for congenital cataract). This will be in the neonatal period.

Type of anaesthesia

General anaesthesia.

Necessary additional diagnostic procedures (preoperative)

Usually needs a consultation by a geneticist or a paediatrician to arrive at the diagnosis.

Particular preparation for airway management

Preparedness for securing the airway while preserving spontaneous respiration.

Particular preparation for transfusion or administration of blood products

None.

Particular preparation for anticoagulation

None.

Particular precautions for positioning, transport or mobilisation

None.

Probable interaction between anaesthetic agents and patient's long term medication

None.

Anaesthesiologic procedure

General endotracheal anaesthesia following inhalational induction of anaesthesia. Use of Airtraq facilitates better glottic view for intubation.
Particular or additional monitoring

None

Possible complications

Failed intubation, possibility of laryngospasm if airway is instrumented in lighter planes of anaesthesia.

Postoperative care

As in any other case.

Information about emergency-like situations / Differential diagnostics

caused by the illness to give a tool to distinguish between a side effect of the anaesthetic procedure and a manifestation of the diseases, e.g.:

None

Ambulatory anaesthesia

Safe.

Obstetrical anaesthesia

Not reported / no personal experience.
These guidelines have been prepared by:

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