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## Author's Reply

### Re: Passive Smoking Also Affects Recovery from Anaesthesia

Dear Editor,

We thank the author for the contribution he has made by referring our article named "Effect of smoking on reversing neuromuscular block" which was published on Turkish Journal of Anaesthesiology and Reanimation.

In our study we aim to compare the effect stress of sugammadex, which is used to antagonize rocuronium bromide that is a nondepolarizing neuromuscular blocker, on smoking and non-smoking patients and the duration of antagonizing. As a result of our study the intubation times of smoking and non-smoking patients, the first rocuronium bromide dose and the time of reaching train of four (TOF) 0.7-0.8-0.9 in the stage of extubation were compared and a statistically relevant difference was observed. Although it is not statistically relevant; the time of reaching TOF 0.7-0.8-0.9 was longer in smoking groups than in non-smoking groups. In the study named "Effects of passive smoking on respiratory system in elective pediatric cases" which is applied on 120 pediatric patients it is found that passive smoking enlarge the time of

recovery and increases the respiratory tract complication ratio. This result supports our study. Although it is known that smoking increases the respiratory tract complication, when literature is searched different results have been found about the effect on rocuronium bromide.

The studies about the effects of smoking, which has negative effect on body systems, on the muscle relaxant that are used in anesthesia application very often and on the drugs which are used to antagonize the muscle relaxant and the studies which show the necessity of quitting smoking that gives big harm in the country's economy and human health, showing the complications due to smoking have great value.

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