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Perioperative pain management—how to optimize multimodal analgesia

Ketevan Machavariani*Tbilisi State Medical University, Georgia***State of The Problem:**

Postoperative pain continues to be inadequately treated. Multimodal analgesic techniques should be offered, but there is no guidance how to use different analgesia techniques for specific procedures. Few years ago the PROSPECT (Procedure-Specific Postoperative Pain Management) working group was created for optimization of perioperative pain management but still is the absence of adequate data for the unification of perioperative pain management and improving patient satisfaction. As a result, about 10% of patients can develop chronic postoperative pain.

Treatment Options:

Common techniques of perioperative pain management are opioid analgesia, Patient Controlled Analgesia (PCA), Non-Steroidal Anti-Inflammatory Medications (NSAIDs), acetaminophen, neuraxial anesthesia, peripheral nerve blocks and local infiltration anesthesia. In most cases multimodal analgesia techniques are using when two or more medications are synergizing each to other, such as opioids and NSAIDs. In addition of this, some authors are recommended the preventive analgesia by using of different medications: pregabalin, ketamine, amitriptyline, clonidine, systemic steroids, vitamin C and lidocaine. By the combination

of these techniques is possible to minimize chronic postoperative pain, opioid requirements and side effects achieve better patient satisfaction. For the optimization of perioperative pain management better understanding needs of the pain mechanisms and medications selection as a whole and in relation to the particular surgical procedure and patient.

Conclusion:

Perioperative pain management involves multifactorial approach for minimize pain prior to incision, during and after surgery. Future clinical trials are needed for safe and effective use of analgesic techniques and medications from different therapeutic classes, which are indicated for acute pain treatment and prevention.

Biography

Ketevan Machavaraini, Associate Professor of the Department of Anesthesiology-Reanimatology at Tbilisi State Medical University. She is engaged in scientific, pedagogical and practical work at the Department of Anesthesiology-Reanimatology of the First University Clinic. She is a member of associations and communities. She has published more than 38 papers in reputed journals.

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