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Audit of Post-Operative Pain After Major Gynaecological Surgery at Sangre Grande Hospital

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INTRODUCTION

Hysterectomy is one of the most frequently-performed gynaecological procedures and can lead to chronic post-operative pain in 17%-32% of women.

For this reason, effective post-operative pain management is necessary to prevent complications such as cardiopulmonary events and deep vein thrombosis, improve patient comfort and satisfaction, afford earlier mobilization and reduce overall cost of care.

At our institution, approximately 2-6 hysterectomies are performed weekly.

OBJECTIVES

- To investigate the effectiveness of perioperative analgesia in women undergoing total abdominal hysterectomy and myomectomy and Sangre Grande Hospital during the periods of May 2019-July 2019.
- To propose strategies to improve post-operative pain management in this patient population.
- To identify risk factors associated with severe pain in the post-operative period.

METHODS

A standardized questionnaire collected in real-time was used to obtain data intra-operatively, in the post-operative recovery room and up to 24 hours post-operative on the ward

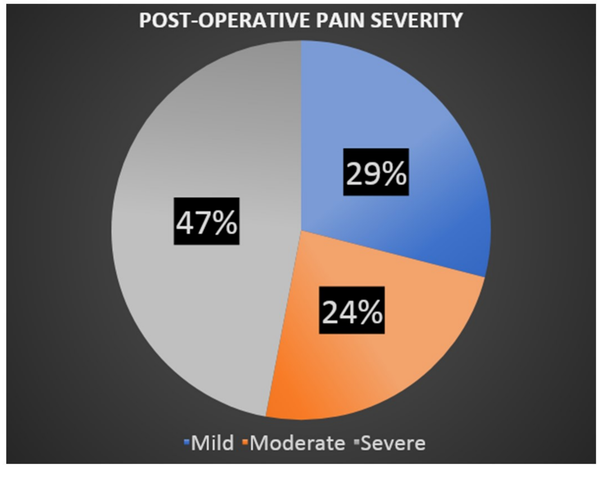
Pain scores were assessed using a numerical-rating scale in the post-operative recovery room.

Aspects of patient history such as BMI and previous abdominal surgery; surgical factors such as midline vs pfannensteil incision and operating time and anaesthetic factors such as number of modes of analgesia employed were examined for possible significance in contributing to post-operative pain.

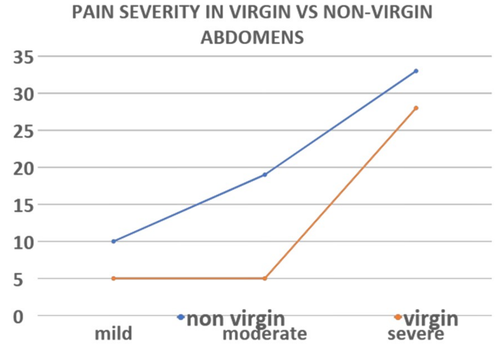
RESULTS

20 patients underwent major gynaecological surgery during the study period. All received general anaesthesia.

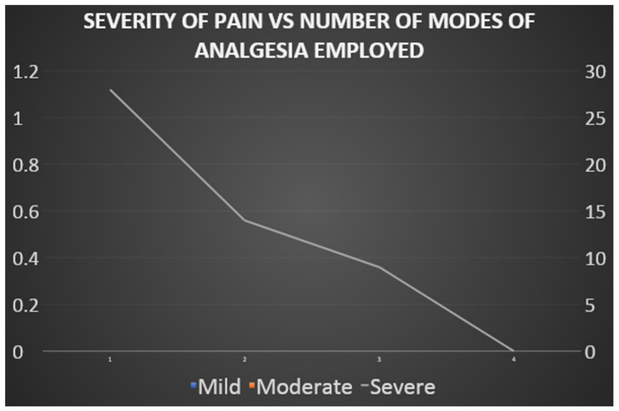
- 47% of these experienced severe pain, 24% moderate and 29% mild in the recovery room.



- 100% of patients receiving midline incisions complained of severe post-operative pain compared with 30% of those with pfannenstiel incisions.
- 42% of patients with BMI >25 experienced severe pain with only 5% of normal BMI patients experiencing this level of pain.
  - However, above BMI 25, pain severity did not appear to increase proportionally with increasing BMI.
- 33% of patients with previous abdominal surgery experienced severe pain as compared with 28% in those with virgin abdomens.



- Of the possible 1-4 modes of intra-operative analgesia, severe pain was experienced in 28% of patients receiving only 1 mode, 14% receiving 2, 9% receiving 3 and 0% in those receiving all 4.



CONCLUSION

Midline incisions, increasing BMI and previous abdominal surgery are significant risk factors for severe post-operative pain. Multi-modal analgesia appears to result in better post-operative pain scores.

REFERENCES

Steinberg, A., Schimpf, M., White, A., Mathews, C., Ellington, D., Jeppson, P., . . . Murphy, M. (2018). Preemptive Analgesia for Postoperative Hysterectomy Pain Control. *Obstetric Anesthesia Digest,38*(2), 110-111. doi:10.1097/01.aoa.0000532310.81063.cc

Prabhu, M., Bortoletto, P., & Bateman, B. T. (2017). Perioperative pain management strategies among women having reproductive surgeries. *Fertility and Sterility,108*(2), 200-206. doi:10.1016/j.fertnstert.2017.06.010