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ANALYSIS OF ULTRASOUND GUIDED PERIPHERAL NERVE BLOCKS FOR POSTOPERATIVE ANALGESIA IN ARTHROSCOPIC SHOULDER SURGERY

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Background and Aims Effective postoperative analgesia is required for patients to recover quickly and begin rehabilitation. In the literature; although there are different dose and volume studies in interscalene block for pain control, there are studies on alternative block types (1, 2). We aimed to investigate retrospectively the frequency of application of interscalene and suprascapular, the blocks we use in routine

Abstract 184 Table 1

	Grup I		Grup II		p
	Meantsd /n-%	Median	Meantsd /n-%	Median	
Age	53.0 ± 12.7	55.5	51.7 ± 14.0	55.0	0.842 [†]
Gender	Female	6 50.0%	4 66.7%		0.502 [‡]
	Male	6 50.0%	2 33.3%		
Weight	81.3 ± 12.8	80.0	81.0 ± 10.9	78.5	0.957 [†]
Height	1.66 ± 0.07	1.65	1.67 ± 0.06	1.68	0.656 [†]
BMI	29.7 ± 4.4	29.9	29.2 ± 5.2	28.9	0.833 [†]
ASA Score	I	1 8.3%	1 16.7%		1.000 [‡]
	II	10 83.3%	5 83.3%		
	III	1 8.3%	0 0.0%		
Patient Satisfaction Score	8.50 ± 1.68	9.00	8.67 ± 1.51	9.00	0.808 [‡]
Duration Of Surgery	200.0 ± 44.8	200.0	180.2 ± 75.2	180.0	0.490 [†]
Duration Of Anesthesia	220.8 ± 46.4	220.0	203.3 ± 68.5	200.0	0.528 [†]
Complication	(-)	11 91.7%	6 100.0%		1.000 [‡]
	(+)	1 8.3%	0 0.0%		

Abstract 184 Table 2

	Grup I		Grup II		p
	Meantsd /n-%	Median	Meantsd /n-%	Median	
VAS Rest					
30. Minute	0.33 ± 0.65	0.00	0.17 ± 0.41	0.00	0.651 [‡]
2 Hours	0.92 ± 1.24	0.00	0.17 ± 0.41	0.00	0.219 [‡]
4 Hours	1.42 ± 1.44	1.50	1.00 ± 1.67	0.00	0.481 [‡]
6 Hours	2.18 ± 2.14	2.00	1.17 ± 1.47	0.50	0.322 [‡]
8 Hours	2.33 ± 2.53	1.50	2.00 ± 2.10	1.50	0.924 [‡]
10 Hours	3.33 ± 3.58	2.50	2.83 ± 2.32	3.50	0.962 [‡]
12 Hours	2.83 ± 2.72	2.00	2.17 ± 2.04	2.00	0.704 [‡]
24 Hours	4.25 ± 3.31	4.00	2.83 ± 2.99	2.00	0.395 [‡]
VAS Motion					
30. Minute	0.67 ± 1.37	0.00	0.17 ± 0.41	0.00	0.607 [‡]
2 Hours	0.75 ± 1.54	0.00	1.33 ± 1.97	0.50	0.315 [‡]
4 Hours	1.42 ± 1.44	1.50	2.00 ± 1.67	2.50	0.435 [‡]
6 Hours	2.58 ± 2.50	2.00	1.67 ± 1.51	2.00	0.388 [‡]
8 Hours	2.58 ± 2.61	2.00	3.00 ± 2.83	2.50	0.775 [‡]
10 Hours	3.25 ± 3.82	1.00	4.17 ± 3.43	5.50	0.810 [‡]
12 Hours	3.92 ± 2.87	3.50	3.33 ± 2.80	4.00	0.603 [‡]
24 Hours	6.00 ± 2.17	6.00	4.33 ± 3.14	3.50	0.201 [‡]
Nausea					
30. Minute	5 41.7%	0 0.0%			0.114 [‡]
2 Hours	5 41.7%	1 16.7%			0.600 [‡]
4 Hours	2 16.7%	1 16.7%			1.000 [‡]
6 Hours	3 25.0%	2 33.3%			1.000 [‡]
8 Hours	2 16.7%	2 33.3%			0.569 [‡]
10 Hours	1 8.3%	0 0.0%			1.000 [‡]
12 Hours	2 16.7%	0 0.0%			0.529 [‡]
24 Hours	2 16.7%	0 0.0%			0.529 [‡]
Vomiting					
30. Minute	2 16.7%	0 0.0%			0.529 [‡]
2 Hours	3 25.0%	0 0.0%			0.515 [‡]
4 Hours	1 8.3%	1 16.7%			1.000 [‡]
6 Hours	2 16.7%	1 16.7%			1.000 [‡]
8 Hours	2 16.7%	0 0.0%			0.529 [‡]

[†] Mann-whitney u test / [‡] Chi-square test (Fischer test)

Abstract 184 Table 3

		Grup I		Grup II		p
		n	%	n	%	
Rescue Analgesia						
30. Minute	(-)	12	100.0%	6	100.0%	1.000 [‡]
	(+)	0	0.0%	0	0.0%	
2 Hours	(-)	12	100.0%	5	83.3%	0.333 [‡]
	(+)	0	0.0%	1	16.7%	
4 Hours	Tramadol	0	0.0%	1	16.7%	0.515 [‡]
	(-)	9	75.0%	6	100.0%	
6 Hours	(+)	3	25.0%	0	0.0%	0.515 [‡]
	Paracetamol	3	25.0%	0	0.0%	
8 Hours	(-)	9	75.0%	4	66.7%	0.569 [‡]
	(+)	3	25.0%	2	33.3%	
10 Hours	Paracetamol	1	8.3%	1	16.7%	0.344 [‡]
	Dexketoprofen	2	16.7%	2	33.3%	
12 Hours	(-)	10	83.3%	6	100.0%	0.529 [‡]
	(+)	2	16.7%	0	0.0%	
24 Hours	Paracetamol	1	8.3%	0	0.0%	0.627 [‡]
	Tramadol	1	8.3%	0	0.0%	
	Dexketoprofen	5	41.7%	1	16.7%	

[‡] Chi-square test (Fischer test)

practice, analgesia consumption in the postoperative period and complications.

Methods After the approval of the ethics committee, the files of the patients who underwent arthroscopic shoulder surgery between 01.01.2019 and 01.03.2020 were evaluated retrospectively.

Results 18 of 40 patients were included in the study. Interscalene block (group I) with 15 ml of 0.5% bupivacaine was applied with a single injection to 12 of 18 patients, while 7.5 ml of interscalene and 7.5 ml of suprascapular block (group II) were applied to 6 patients with a posterior approach. No significant difference was found in age, gender, BMI, ASA score distribution, patient satisfaction score, duration of surgery and anesthesia, and complication rate, 30th minute, 2nd, 4th, 6th, 8th, 10th, 12th, 24th hour VAS resting score, VAS movement score, nausea and vomiting rate (table 1, 2, 3). Hypoesthesia in the temporauricular region was defined 24 hours after the operation, but it was decided that it was due to the beach chair position, and it gradually decreased in the follow-up and improved in 1 week.

Conclusions Since the inability to detect any superiority between the groups may be due to the insufficient number of cases, it should be supported by a prospective study.

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SAFETY AND EFFICACY OF REGIONAL ANESTHESIA ALONE FOR PATIENTS UNDERGOING BREAST SURGERY; A QUALITATIVE REVIEW

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Background and Aims Breast cancer and subsequent breast surgery is prevalent in North America. General anesthesia (GA) is