Abstract B19 Figure 2

Total time taken to perform sciatic nerve block was comparable between the groups.

Conclusions Popliteal sciatic nerve block given at pre bifurcation has faster onset of action compared to post bifurcation and block performance time was comparable and independent of BMI in both the groups.

TO COMPARE THE ANALGESIC EFFICACY OF ON ARRIVAL ULTRASOUND GUIDED PERICAPSULAR NERVE GROUP BLOCK (PENG) VS FEMORAL NERVE BLOCK FOR HIP FRACTURE

Background and Aims The incidence of hip fracture is increased in elderly people in recent times and the pain associated with hip fracture is an important source for significant morbidity and mortality. Effective pain management immediately after hospitalization will reduce the in-hospital and long term complications following hip fractures. UGRA has become widely popular over the last decade and conventional femoral nerve block proved effective analgesia with fewer side effects. To improve the quality of analgesia PENG block was developed recently for blocking femoral, obturator and accessory obturator nerve branches supplying the hip joint. Hence we conducted the study to compare the analgesic efficacy of femoral nerve block and PENG block in hip fracture patients admitted to the hospital during preanaesthetic evaluation.

Methods we choose a sample size of 50 and randomly allocated in to 2 groups including ASA I, I, III and age group between 50 - 90 years. 20 ml of 0.25% Bupivacaine was used in both groups under ultrasound guidance. Primary objective was to assess VAS score at rest. Secondary objectives were to assess hemodynamic changes and VAS score on passive leg raise at 1 hour after block is being given.

Results Better hemodynamics were achieved in both the groups. When compared VAS score in PENG group was better than femoral nerve group in the initial 15 to 30 minutes but at 1 hour both groups had comparable VAS scores.