Effectiveness of Added Epidural Fentanyl or Pethidine for Orthopedic Surgery.

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The effectiveness of fentanyI and pethidine added to 2% Xylocaine with adrenaline I: 200,000 used in epidural anesthesia for orthopedic surgery were compared. Twenty-four patients scheduled for lower extremity surgery were randomized into two groups. Both received local anesthetics via epidural catheter until the maximum spread reached T8. The added epidural narcotic dosage in 1 g/kg for fentanyI and 1 mg/kg for pethidine. Sensory block were evaluated by pinprick and motor block with Bromage's scale. The study showed that both groups were comparable in rapid onset of analgesia, intensified sensory and motor blockade of epidural anesthesia with stable hemodynamic parameters and helpful in tourniquet pain prevention. The differences were longer duration of analgesia but more minor complications (nausea, drowsiness) with epidural pethidine. Added epidural fentanyl or pethidine proved more advantageous than plain epidural

anesthesia by providing better operating conditions. The patients were reasonably comfortable and required little sedatives.