

Effects of pregabalin on postoperative morphine consumption and pain after abdominal hysterectomy with/without salphingooophorectomy: A randomized ,double-blind trial

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ABSTRACT

BACKGROUND: As optimal pain relief after surgery is difficult to achieve with the use of just one drug, many pain experts advocate the use of two or more classes of medications so as to reduce the side effects from any one drug. Pregabalin have antiallodynic and antihyperalgesic properties useful for treating neuropathic pain. These properties may also be beneficial in acute postoperative pain. In this trial, we assessed the analgesic efficacy and safety of preoperative pregabalin on pain after abdominal hysterectomy with/without salphingooophorectomy and on morphine consumption in patients.

METHODS: Eighty patients scheduled to undergo elective abdominal hysterectomy with/without salphingooophorectomy were randomized to receive oral medications: ativan 0.5 mg 1 h before surgery, and pregabalin 300 mg 1 h before surgery. Anesthesia was induced with thiopental (3-5 mg/kg) and atracurium (0.6 mg/kg) and maintained with sevoflurane with a fresh gas flow of 2 L/min (50% N₂O in O₂) and morphine (0.1-0.2 mg/kg). All patients received patient-controlled analgesia with morphine with a 1 mg incremental dose, 5-min lockout interval, and 4-h limit of 40 mg postoperative. Patients were studied at 0, 1, 4, 12, and 24 h for visual analog (VAS) pain scores and morphine consumption and occurrence of any side effects, such as nausea and vomiting, constipation, dizziness, somnolence, and peripheral edema .

RESULTS: pregabalin group reduced total morphine consumption (mean 7.10 +/- 2.0, p< 0.001) during the first 24 hr after surgery and reduced VAS pain score at 0, 1, 4, 12 and 24 hr postoperative significantly (p < 0.001) . Pregabalin reduced common opioid-related adverse effects, such as moderate to severe nausea, vomiting. The most common adverse effects of pregabalin were sedation and dizziness, but no statistic significant between two group.

CONCLUSION: Pregabalin a total dose of 300 mg, administered 1 hr preoperative before abdominal hysterectomy with/without salphingooophorectomy, reduced morphine consumption and VAS pain score at rest 24 hr postoperative significantly. And may reduced common opioid-related adverse effects, such as moderate to severe nausea, vomiting.