

Bupivacaine hydrochloride replacing ketorolac tromethamine in maxillofacial surgery

Shohda Khatun

Sheik Mujib Medical University, Bangladesh

This is a prospective case control study of 200 maxillofacial surgical patients. The study was conducted to check whether pre-emption of 0.25% bupivacaine hydrochloride infiltration in the incisional line is more effective than intravenous ketorolac tromethamine pre-emption. To reduce postoperative pain as well as opioid and ketorolac tromethamine related complication with early and safe recovery of the patient.

The patients were selected who had been operated under the ASA Grade-I and Grade-II criteria. In the study group 0.25% bupivacaine hydrochloride was infiltrated in the operated area the dose scheduled according to the surface area of the operated filled (10 ml-15 ml) 5 min before incision and the controlled group 30 ml ketorolac tromethamine was injected intravenously. No opioid was used in the operative patient but had given intravenous PCA by adjusting to 10mg dosage with lock out interval of every 20 min and assessed at 2, 4, 8, 12 and 24 hrs.

All patients received conventional general anesthesia with pre-oxygenation with 100% O₂, then TPS- 3-5 mg/kg I/V and after suxamethonium 1-2 mg/kg intubated and maintained with N₂O₂: O₂ halothane 66%, 33% & 0.5%. No opioids were used before or during operation and patients were reversed at the end of operation with Neostigmine/Atropine. In the post-operative period patients were put on to intravenous PCS immediately. With loading dose of Pethidine HCl 30 mg. PCA dose adjusted to 10 mg with lock-out interval 20 min. Patients were assessed at 2,4,8,12 & 24 hours (time of incision is considered as '0' hour).

Post operatively pain score sedation score other hemodynamic status of the two groups of the value were significant (p value-<0.05). Well controlled postoperative pain associated with reduced sympatric activity minimizes the response of surgery. This is desirable for surgery and anesthesia. So this study may be an effective and safe method for post-operative measure.

Biography

Shohda Khatun completed her Bachelor of Dental Surgery Degree (BDS) in 1981 from Dhaka University and did supervised training on General Surgery one year, ENT for one year and orthopedics for six months. She obtained her MCPS Degree in Dental surgery from Bangladesh College of Physicians and surgeons (2004) and Masters of surgery Degree (MS in Oral and Maxillofacial Surgery) in 2008, from Dhaka University. She conducted 32 years of Service in the respective department. She has been working as senior consultant at Bangabandhu Sheikh Mujib Medical University from the year 2009-Till date. She has 20 Original research articles, published in different recognized medical journals.

nazmus_sakib70@yahoo.com