

Vol.11 No.9

Analgesic effect of paracetamol vs the combination of paracetamol / parecoxib vs the combination of pethidine/paracetamol in patients undergoing open inguinal hernia repair

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Abstract

The purpose of this study was to compare the analgesic effect of paracetamol and the paracetamol / parecoxib and paracetamol/pethidine combinations in patients undergoing open inguinal hernia repair. The study was performed on 259 patients hospitalized at the Department of Surgery at the General University Hospital of Patras from February 1, 2017 to May 10, 2019. These patients had inguinal hernia. Patients were divided into three different groups (Group A, B and C) based on their postoperative analgesic treatment. Group A patients received paracetamol and pethidine, group B patients received paracetamol and parecoxib and group C received paracetamol monotherapy. NRS (Numerical Rating Scale) pain assessment was performed at 45 minutes, 2 hours, 6 hours, 12 hours and 24 hours after taking the first analgesic drug. Statistical processing of the data was done using the stata 13 program. Statistical processing of our data revealed a statistically significant difference between patients in group A who reported less pain than patients in group C (P = 0.00) and between patients in group B who reported less pain than patients in group C (P = 0.00). No statistically significant difference was found between patients in group B and A (P = The combination of postoperative analgesic 1.00). paracetamol and parecoxib is equivalent to the combination of paracetamol and pethidine. These two combinations of postoperative analgesic therapy outweigh the paracetamol monotherapy and are therefore indicated in open inguinal hernia repair.



Biography:

Francesk Mulita is a Resident General Surgeon at the Department of Surgery at the General University Hospital of Patras. He has taken a Master degree studying post-operative analgetics after most common surgical operations. Since 2019 he is PhD candidate studying post-



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 Secondary Hemophagocytic Syndrome in an 82-Year-Old Covid-19 Patient

6th <u>International Conference on Surgery and Anaesthesia;</u> Webinar - April 13-14, 2020

Abstract Citation:

Francesk Mulita, Analgesic effect of paracetamol vs the combination of paracetamol / parecoxib vs the combination of pethidine/paracetamol in patients undergoing open inguinal hernia repair, Anesthesia 2020, 6th International Conference on Surgery and Anaesthesia April 13-14, 2020

(https://surgery-

anaesthesia.annualcongress.com/abstract/2020/analgesic-effect-of-paracetamol-vs-the-combination-of-paracetamol-paracetamol-in-patients-undergoing-open-inguinal-hernia-repair)