

Anesthesia regimen linked to postorthognathic op pain

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Patients undergoing orthognathic maxillofacial surgery experience more pain postoperatively if they receive anesthesia with propofol and remifentanil versus inhalational agents and longer-acting opioids, according to a study published in the Summer 2012 issue of *Anesthesia Progress*.

(HealthDay) -- Patients undergoing orthognathic maxillofacial surgery experience more pain postoperatively if they receive anesthesia with propofol and remifentanil versus inhalational agents and longer-acting opioids, according to a study published in the Summer 2012 issue of *Anesthesia Progress*.

Soudeh Chegini, from the Wexham Park Hospital in Slough, U.K., and colleagues retrospectively compared the recovery characteristics of 51 patients who had undergone orthognathic maxillofacial surgery. Twenty-one had received anesthesia with intravenous propofol and remifentanil and 30 had received anesthesia with volatile inhalational agents and longer-acting opioids.

The researchers found that patients who had received propofol and remifentanil reported significantly higher pain scores in the first four hours after surgery. The median recovery time for this group was shorter (65 versus 93 minutes), though this did not reach statistical significance. Both groups had similar early postoperative opioid usage, hemodynamic parameters, and

postoperative nausea and vomiting.

"We believe this is the first report comparing the effects of different opioid-based anesthetic regimens on early recovery from orthognathic surgery, and we believe this report may be used as the starting point for a controlled study," Chegini and colleagues conclude.

More information: Abstract

Full Text

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