

Intra-op liberal fluid therapy effectively cuts post-op nausea

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for the liberal versus the restricted group. During the first six postoperative hours, the incidence of [fluid intake](#) was significantly higher in patients in the restricted group; 83 and 17 percent of children in the restricted versus the liberal group complained of thirst (relative risk, 0.19). Satisfaction was higher for parents of patients in the liberal versus the restricted group (mean difference, ?0.9). There were no complications attributed to liberal fluid therapy.

"Liberal intraoperative fluid therapy was found to be effective in reducing PONV in children undergoing lower abdominal surgery," the authors write.

More information: [Abstract](#)
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(HealthDay)—For children undergoing lower abdominal surgery, intraoperative liberal fluid therapy is effective for reducing postoperative nausea and vomiting (PONV), according to a study published online June 6 in *Pediatric Anesthesia*.

Vighnesh Ashok, from the Post Graduate Institute of Medical Education and Research in Chandigarh, India, and colleagues examined the effects of intraoperative liberal [fluid](#) therapy with crystalloids on PONV in children aged 3 to 7 years.

Participants were undergoing lower abdominal and penile surgery under general anesthesia and were randomized to either a restricted group, receiving 10 mL/kg/hour, or a liberal group, receiving 30 mg/kg/hour infusion of Ringer's lactate solution intraoperatively.

The researchers found that the incidence of PONV was significantly less in the liberal versus the restricted group (27.4 versus 45.8 percent of [patients](#) had vomiting, respectively; relative risk, 0.59). The adjusted odds ratio for PONV was 2.24

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