

# Preemptive analgesia may cut post-op pain in anorectal surgery

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the post-anesthesia care unit and at eight hours postoperatively. A similar number of medication-related side effects was reported for the groups.

"Preemptive analgesia is safe and results in decreased pain in the early postoperative period following anorectal surgery," the authors write. "It should be implemented by surgeons performing these procedures."

**More information:** [Abstract/Full Text](#) ([subscription or payment may be required](#))

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(HealthDay)—Preemptive pain medication is safe and reduces pain in the early postoperative period for patients undergoing anorectal surgery, according to a study published in the July issue of *Diseases of the Colon & Rectum*.

Justin T. Van Backer, M.D., from Albany Medical Center in New York, and colleagues evaluated the effectiveness of preemptive analgesia in reducing [postoperative pain](#) among adult patients undergoing surgery for anal fissure, fistula or condyloma, or hemorrhoids. Patients were randomized to receive preoperative oral acetaminophen and gabapentin followed by intravenous ketamine and dexamethasone before incision (30 participants) or oral placebos (31 participants).

The researchers found that [patients](#) in the active group had significantly less [pain](#) in the post-anesthesia care unit and at eight hours postoperatively. Furthermore, significantly fewer participants in the active group used narcotics in

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