Analgesia and Discharge following Local Infiltration Anaesthesia combined with General Anaesthesia for abdominoplasty in the Ambulatory Setting

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Background and Aim:

Local infiltration anaesthesia reduces postoperative analgesics requirements after abdominoplasty. The aim of this study was the influence of local infiltration anaesthesia with levobupivacaine on acute postoperative pain in patients who underwent abdominoplasty in day surgery.

Preincisional infiltration of local anaesthetic before abdominoplasty

Methods

The study included 55 patients within age range from 20 to 72 years old. Study was conducted from January 2016 to February 2019. Postoperative pain after abdominoplasty was evaluated.

LIA was performed before closure of abdominal wall after resection of skin and subcutaneous fat in lower part of abdominal wall. Infiltration was performed after plication of rectus abdominis muscles with single shot of 40 ml 0.25 % Bupivacaine.

Results

Postoperative pain was reduced in the abdominal wall and in the wound area around the umbilicus and in lower abdomen scar after waking from general anaesthesia. Occurrence of acute postoperative was noticed in all participants. 85% of patients required an additional dose of analgesics and only in 3% of patients was required during the first postoperative day discharged during first 48 hours.

Conclusion

Effective intra and post-operative pain management is mandatory for every patient, as it can positively affect postoperative recovery and clinical outcomes. The use of general anaesthesia combined of local infiltration anaesthesia with levobupivacaine facilitated an earlier postoperative discharge and appearance of acute postoperative pain did not lead to prolonged stay in the facility for day surgery. discharged during first 48 hours.

References

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