Hyperbaric prilocaïne for one-day spinal anesthesia: a large cohort retrospective study

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INTRODUCTION

Hyperbaric 2% prilocaïne (HP) is increasingly used for spinal anesthesia. Therefore, we conducted a retrospective study on a large panel of patients scheduled for day-case surgeries. Intrathecal HP was evaluated in terms of efficiency, side effects, complications and also the effect of sufentanil as an adjuvant.

MATERIAL AND METHODS

Following data were collected: failure, hypotension-bradycardia, nausea, urinary retention, mean satisfaction score (graded from 0 to 10), mean first VAS during PACU stay and mean maximum VAS (0-10), TNS. Intrathecal HP was compared to the association HP-sufentanil, by using a propensity score, after matching groups on the following confounding variables: gender, age, weight, size, BMI, ASA score, type of surgery, dose of HP, analgesics, midazolam.

RESULTS AND DISCUSSION

Fig 1: Flowchart

Fig 2: Distribution of surgeries

Fig 3: Patient's outcomes before propensity

Fig 4: Length of stay

- Mean satisfaction score: 8.51 ± 1.87
- Mean first recorded VAS in the PACU: 0.11 [0-9]
- Mean maximum VAS: 0.76 [0-9]

One patient described typical
Clinical signs of TNS

CONCLUSION

HP 2% is efficient and side effects are rare. The adjunction of sufentanil does not modify patient's outcomes, except the length of stay inside hospital.