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Effects of Dexmedetomidine as an Adjunct to General Anesthesia on Postoperative Pain and Opioid Consumption in Major Abdominal Surgery

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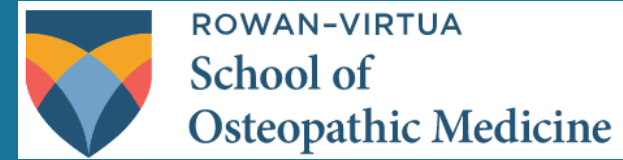
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Elrefahy, Ahmad H., "Effects of Dexmedetomidine as an Adjunct to General Anesthesia on Postoperative Pain and Opioid Consumption in Major Abdominal Surgery" (2024). *Rowan-Virtua Research Day*. 1.
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Effects of Dexmedetomidine as an Adjunct to General Anesthesia on Postoperative Pain and Opioid Consumption in Major Abdominal Surgery



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Introduction

- Dexmedetomidine, an alpha-2 adrenergic receptor agonist, it can be utilized as an adjunct to anesthesia due to its sedative, analgesic, and opioid-sparing properties .
- This comprehensive review aims to explore the impact of dexmedetomidine on postoperative pain and opioid consumption in major abdominal surgery, providing valuable insights into its potential benefits and considerations.

Methods

A comprehensive review and analysis of existing models, and concepts related to postoperative pain scores and opioid consumption.

Keywords: dexmedetomidine, general anesthesia, major abdominal surgery, postoperative pain, opioid consumption, Dexmedetomidine risk-benefit profile.

Results

- The reviewed literature shows the beneficial effects of dexmedetomidine in improving postoperative pain management and reducing opioid consumption in major abdominal surgery.

- When dexmedetomidine is used in addition to general anesthesia, postoperative pain ratings are considerably decreased.
- It has been observed that dexmedetomidine reduces the need for opioids during the recovery phase.
- Compared to control groups, intraoperative administration of dexmedetomidine has been linked to reduced severity of postoperative pain and increased patient satisfaction.
- According to the data shown in Figure 1, 50% of patients in the dexmedetomidine group did not require morphine following extubation. By comparison, just 24 percent of patients in the placebo group did not require morphine.

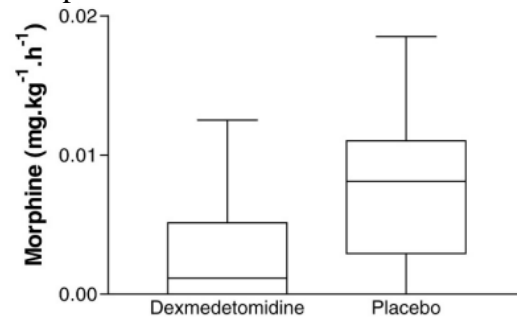


Figure 1 displays the requirements for rescue analgesia with morphine during the extubating period in patients who received either dexmedetomidine or placebo. Source [Venn RM, Hell J, Grounds RM. Respiratory effects of dexmedetomidine in the surgical patient requiring intensive care. Crit Care. 2000;4(5):302-8]

- There are potential side effects associated with dexmedetomidine to consider.
- Bradycardia and hypotension are the most reported adverse events.
- Careful patient selection, close hemodynamic monitoring, and appropriate management strategies are essential to mitigate these risks.

Discussion

- Dexmedetomidine administration as an adjunct to general anesthesia in major abdominal surgery improves postoperative pain management and reduces opioid consumption.
- Dexmedetomidine offers an analgesic alternative to opioids, which have side effects and addiction risks.
- Extra care must be taken with patient selection, considering patients cardiovascular conditions and individual characteristics to decrease adverse events.
- To optimize benefits and reduce problems, more research is required to discover the ideal dosage and timing of dexmedetomidine administration.

This review demonstrates the advantageous effects of dexmedetomidine in enhancing postoperative pain management and lowering the use of opioids during major abdominal surgery.

Conclusion

- In major abdominal surgery, dexmedetomidine shows encouraging outcomes as an adjuvant to general anesthesia for efficient postoperative pain management and decreased opioid intake. - To maximize its usage, cautious patient selection, close observation, and suitable treatment techniques are essential.
- To provide uniform standards and guidelines related to the use of dexmedetomidine, more study is required.
- There is hope that dexmedetomidine will help to enhance perioperative analgesia.

References

