PAIN MANAGEMENT AFTER SURGICAL TONSILLECTOMY- IS THERE A FAVORABLE ANALGESIC?

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Pain intensity postoperatively was equally managed with ibuprofen and acetaminophen. The study concluded that there wasn’t any statistical difference in postoperative pain intensity between group which was treated with ibuprofen and the group treated with acetaminophen.

Pain level significantly influenced diet 7 days postsurgery
1 (0.61%) child was on clear fluid and 56 (34.35%) were on soft diet 7 days after the surgery (p<0.05)

Hospitalization 7 days postsurgery was significantly positively correlated with pain levels in children
VAS scores were significantly higher in children who were hospitalized because of dehydration, fever and low food intake (1.46 vs.3.67, p=0.001)

Introduction
Tonsillectomy is one of the most frequently conducted surgical procedures in the world. Main postoperative concerns involve pain and late postoperative bleeding. Use of analgesics postoperatively is highly recommended. Standard analgesics used in postoperative child care in Serbia involve ibuprofen or acetaminophen.

The goal of the study
The aim of this study was to examine how commonly used analgesics treat pain and influence type of diet after cold-steel extracapsular tonsillectomy. Also, study examined if age, gender, postoperative occurrence of nausea, repeated hospitalization and antibiotic were related to pain intensity.

Material and methods
Prospective study on 163 children (males and females, age 4 to 18 years) who underwent underwent cold-steel extracapsular tonsillectomy in general endotracheal anesthesia. For pain management postoperatively acetaminophen 15 mg/kg/dose every 4 h and ibuprofen 10 mg/kg/dose every 6 h (maximum 40 mg/kg/ day or 2.4 g/day) were used. The degree of pain was measured using a visual analogue scale (VAS: 0–100 mm). Information about the type of diet (clear fluid, soft diet or normal diet) was recorded. In cases of postoperative fever and high white cell blood count, ceftriaxone was given up to 3 days with switch therapy to oral antibiotics, cefixime or cefpodoxime up to seven days. Measurements were made 4 h, 12 h, 24 h and 7 days postoperatively.

VAS scores 4h, 12h, 24h and 7 days postoperatively

Future research would include study pain management in children with otitis media.

Diet after 4h, 12h, 24h and 7 days and VAS scores

Gender, postoperative occurrence of nausea, repeated hospitalization, antibiotic use and VAS scores