P-118 - ANXIETY INCREASED PERIOPERATIVE PAIN PERCEPTION IN CHILDREN

I.Bellido[1], S.Perez-Bertolez[2], V.Bellido[3], A.Gomez-Luque[4]

[1]Pharmacology and Clinical Therapeutics, School of Medicine, University of Malaga, [2]Paediatric Surgery Service, [3]Paediatric Intensive Care Unit, Carlos Haya Universitary Hospital, [4]Anaesthesia Service, Virgen Victoria Universitary Hospital, Malaga, Spain

Children undergoing surgery experience show presurgical anxiety high levels. Our aim was to examine the relationship between perisurgery anxiety and pain perception in children.
Methods: An observational prospective study in children (< 14 years old) undergoing elective major surgery and outpatient surgery was done. Clinical stage, surgery/anaesthesia procedures, and perioperative complications were recorded. Anxiety (STAIC test) and pain (VAS scale) were recorded before surgery, in post-anaesthetic recovery unit (PARU), in one-day unit (ODU) and 24 h after surgery (24hU).
Results: 319 children 4.4±0.2 years old (85 female 5.5±0.4 years old, 234 male 4.1±0.2 years old) were enrolled. The surgery procedures were hernia repair (40.4%) followed by dermatologic extirpations (12.5%), and appendicectomies (9.7%). A 79% of the patients had general anaesthesia and 16.9% had locorregional-general anaesthesia. In PARU: 9.1% of the patient received analgesia: ketorolac 5.3%, metamizol 2.2%, other NSAIDs 6.3%, opioids 1.8%, benzodiazepines 2.2%, NSAIDs+opioids+benzodiazepines 0.3%). In ODU: 47% of the patient received analgesia (ibuprofen 39.5%, paracetamol 7.6%, metamizol 2.8%). In 24hU: 50.2% of the patient received analgesia: metamizol 27%, ibuprofen 16%, paracetamol 3.4%, ketorolac 0.6%, opioids 1.2%, benzodiazepines 0.3%, NSAIDs+paracetamol 0.9%, NSAIDs+opioids+benzodiazepines 0.6%, NSAIDs+opioids+ antiemetics 4.7%, elastomers 4.7%. Total medium AVS were (% of increment vs. pre-surgery): pre-surgery 0.89 ±0.1< < PARU 1.39±0.1 (56.1%) = ODU 1.44 ±0.1 (61.7%) = 24hU 1.91±0.1 (94.8%) (p< 0.05). Anxiety positively correlated with pain sensitivity and unpleasantness in both, PARU and ODU (Pearson coefficient correlation 0.559 and 0.467, respectively).
Conclusion: Perisurgery anxiety increase pain perception leading an increased analgesic consumes in children.

https://doi.org/10.1016/S0924-9338(12)74285-2 Published online by Cambridge University Press