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Tramadol intrathecal after cesarean section

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Background and Aims: Spinal anesthesia is the gold standard for cesarean section. many products are added to local anesthetics are used to reduce the intensity of sympathetic block and improve the duration of analgesia.

Purpose: intrathecal effects of tramadol in terms of side effects and duration of analgesia.

Methods:32 parturients, ASA I or II, scheduled caesarean or delayed emergency after informed consent criteria for non-inclusion: counter indications for spinal anesthesia and urgent caesarean section spinal: anesthesia : 10 mg bupivacaine 0.5% isobaric + 12.5µg Fentanyl + 20mg Tramadol

Pre-filling 15 ml / kg of saline Regular evaluation in per and postoperative: hemodynamic and respiratory parameters (BP, HR, RR, SPO2) side effects: nausea, vomiting, pruritus, thrill, sedation score, respiratory depression Postoperative pain: EVA at H03, 06, 12, 24, 36 the time of first request of morphine bolus and the cumulative dose of morphine / the 24 hours postoperative the delay of the resumption of the transit multimodal analgesia: paracetamol 01g / 06h in IV diclofenac 100mg / day in IM

Results:presence of nausea and vomiting

quality analgesia but of short duration less than 24 hours requiring the use of morphine

Conclusions: Intrathecal tramadol had provide a good analgesia for caesarean section, but the increased incidence of nausea and vomiting limited its use.

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