

EFFECTIVENESS OF EPIDURAL ANALGESIA IN PATIENTS UNDERGOING SURGERY IN SPECIALIZED CANCER HOSPITAL, CO-INTERVENTIONS & EFFECT ON SURGICAL OUTCOMES

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BACKGROUND

- Epidural analgesia is the gold standard for postoperative pain control.
- It offers superior relief, fewer side effects and faster recovery.
- It is critical in cancer surgeries where optimal pain management is essential for better surgical outcomes.

METHODS

Design: Retrospective computerized analysis

Data Period: October 8 – November 8, 2024

Sample: 60 patients

Inclusion Criteria:

- Major abdominal, thoracic, orthopedic surgeries
- ASA scoring not considered
- Epidural analgesia for post-op pain management

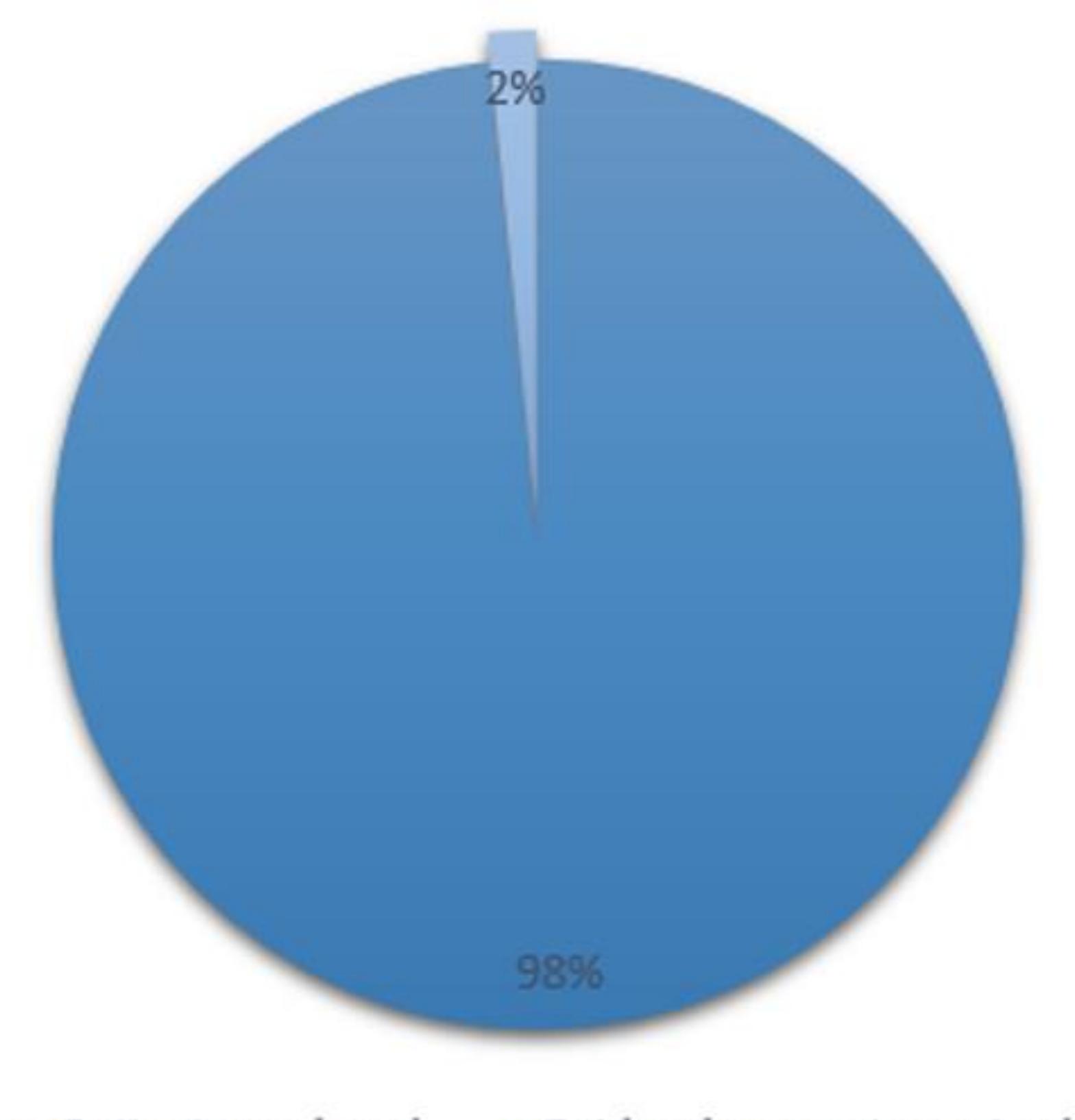
Pain Assessment: Numeric Rating Scale (NRS) Day 0 to Day 4

Comparison: Epidural vs. Parenteral opioids

DATA EXTRACTION

A total of 60 patients were enrolled in the study (Figure 1). 2% did not require epidural analgesia, and 98% were included in the final analysis.

Fig 1: Total Patients Enrolled



OBJECTIVES

Primary Objective:

- Evaluate the effectiveness and failure rate of postoperative epidural analgesia.

Secondary Objectives:

- Identify causes of failure
- Record complications and adjunct interventions.
- Assess surgical outcomes in relation to pain control.

RESULTS

The Effective Pain Relief was 81.66%. Failure Rate was 13.33% (International average: 12-13.1%) Poor pain control led to respiratory issues and prolonged recovery.

Fig 4: Overall Epidural Effectiveness

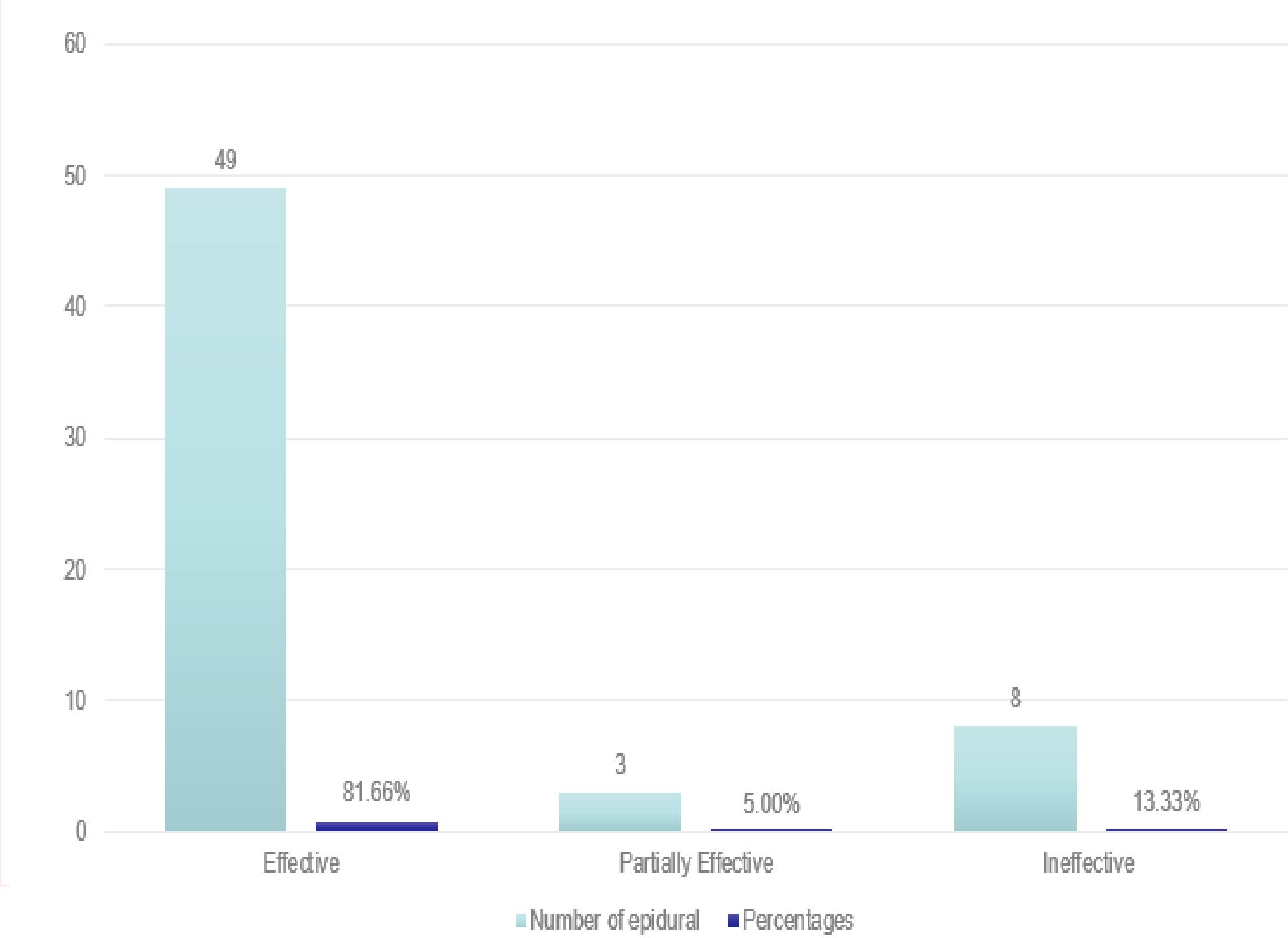


Fig 5: Epidural Complications and Possible Interventions

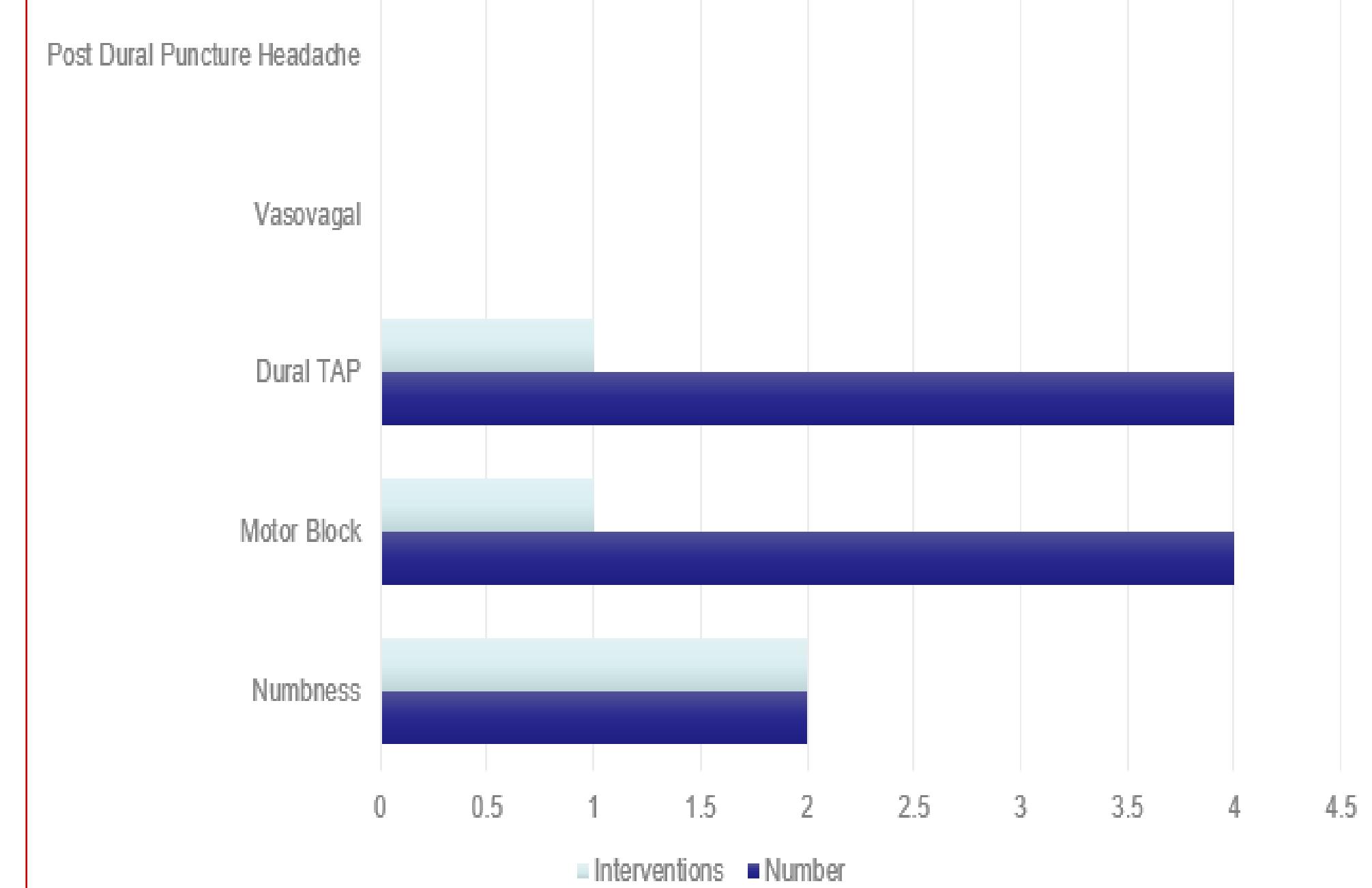
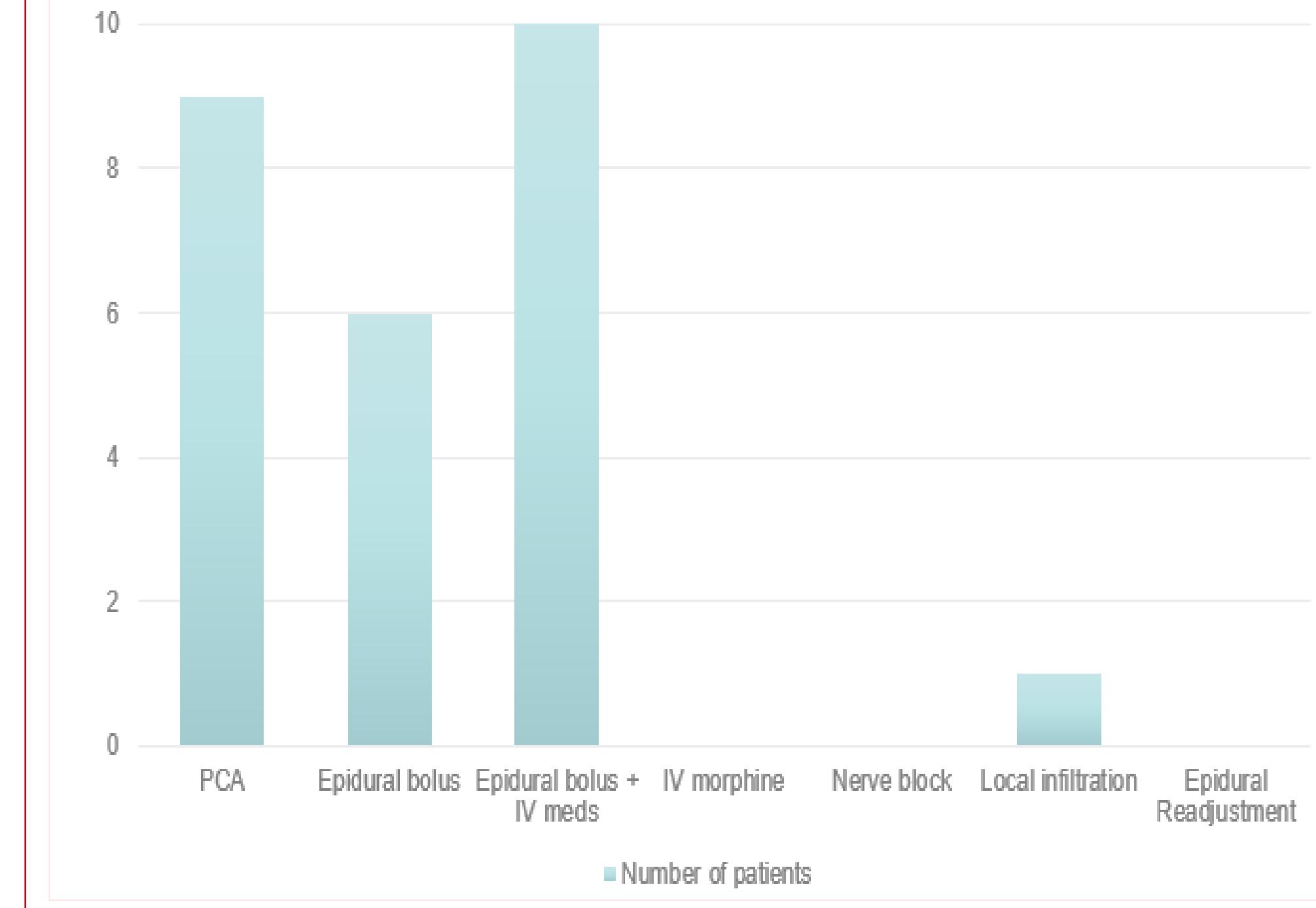


Fig 6: Interventions & Adjuncts used with Epidural



ANALYSIS

Fig 2: Surgical specialty wise epidural effectiveness rate

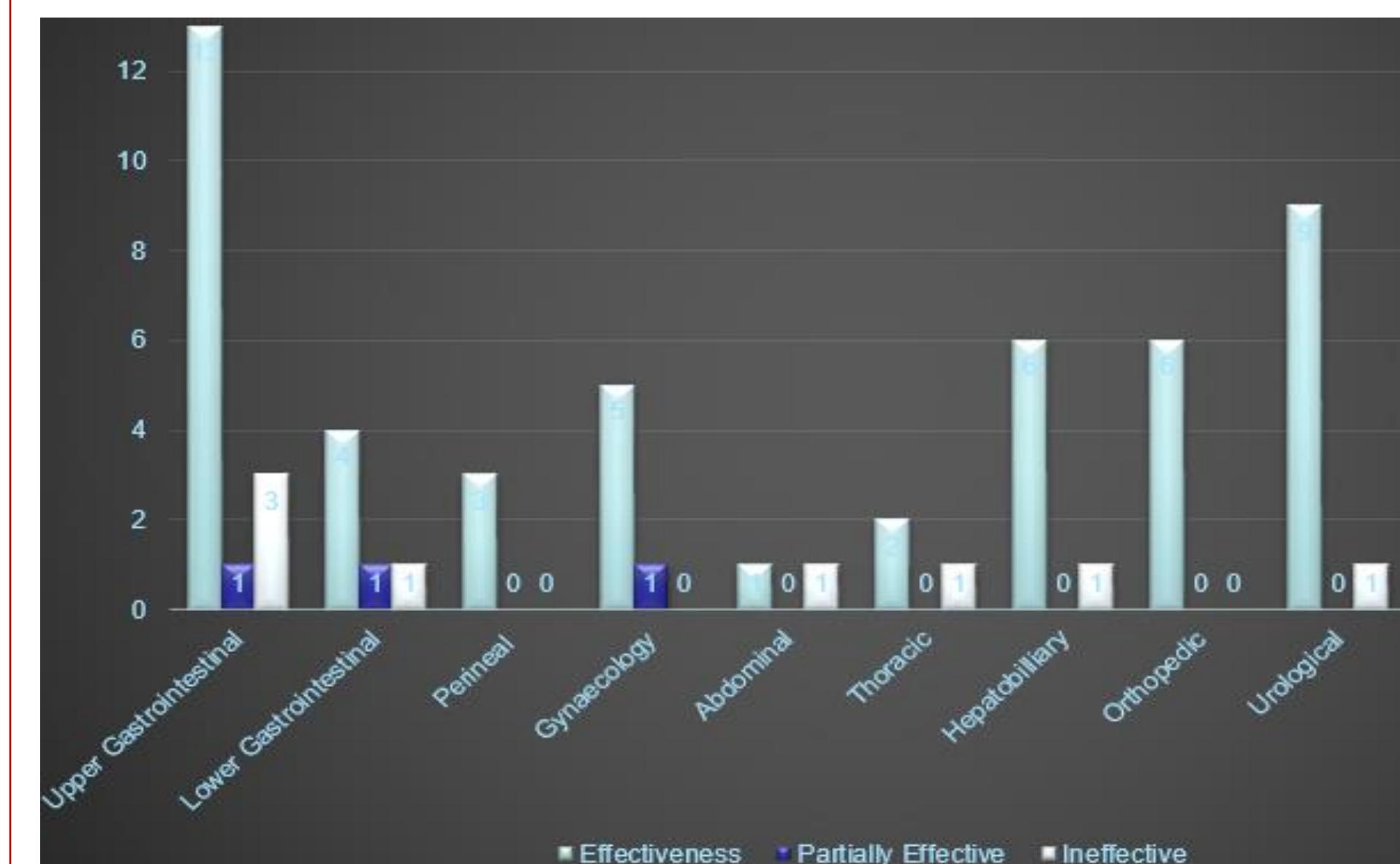
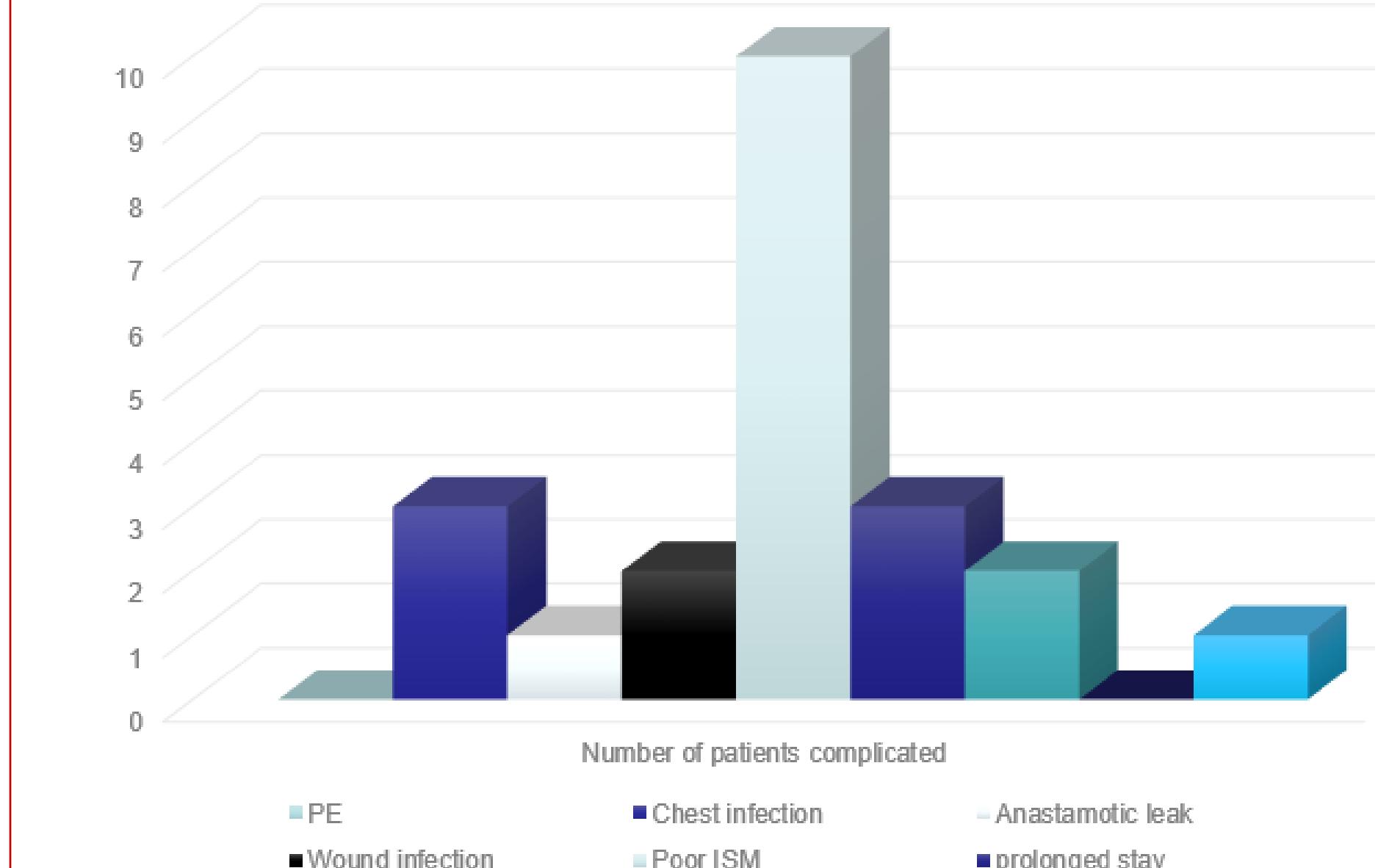


Fig 3: Surgical Complications



CONCLUSION

- Epidural analgesia remains highly effective and safe for cancer surgeries.

Continuous monitoring ensures:

- Fewer complications
- Optimal surgical outcomes
- Minimal reliance on opioids

Recommendation: Encourage use in major surgeries with close follow-up for pain assessment and adjustments.



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