26168 - COMPARISON OF INTRAARTICULAR 0.5% BUPIVACAINE AND MEPERIDINE AT THE END OF ARTHROSCOPY ON POSTOPERATIVE ANALGESIA

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Introduction:

The aim of this study was to compare the analgesic effect of intraarticular bupivacaine, meperidine and their combination on postoperative pain after arthroscopy.

Methods:

After ethical approval, sixty patients (ASA I or II) undergoing arthroscopic knee surgery during general anesthesia were allocated to this study. At the end of surgery, patients were randomly assigned to one of three groups to receive intraarticular 0.5% bupivacaine 100 mg (Group B), meperidine 100 mg (Group M), or a combination of 0.5% bupivacaine 100 mg and meperidine 100 mg (Group BM) to a total volume of 20 ml. Methylprednisolone 40 mg was added to solution to all groups. Postoperative pain was assessed using a visual analogue scale (VAS) at 2, 6 and 12 hrs, detecting first analgesic requirements, and measuring total fentanyl consumption (by patient-controlled analgesia) during first 24 hours. Side effects were recorded.

Results:

First analgesic requirement were more prolonged in BM group than other two groups, and also more prolonged in M group than B group (300 ± 38 , 132 ± 60 , and 82 ± 45 min, respectively). Furthermore, total fentanyl consumption were significantly lower in BM group than other two groups, and also lower in M group than B group (307 ± 52 , 352 ± 98 , and 382 ± 105 mcg, respectively). Mean VAS were low and did not significantly different between groups. No specific side-effects were observed.

Discussion:

Our study indicates that intraarticular meperidine is a potential alternative to bupivacaine in knee arthroscopy. Furthermore, combination of meperidine and bupivacaine provided more prolonged analgesia and reduced iv fentanyl requirement during the first day after arthroscopy compared with bupivacaine and meperidine alone.

Reference:

Pain. 1999 Mar;80(1-2):229-38.