26473 - PREOPERATIVE LOW-DOSE KETAMINE REDUCES POSTOPERATIVE PAIN INTENSITY AND TOTAL ANALGESIC CONSUMPTION AFTER UROLOGICAL SURGERY IN CHILDREN IN AHARY HOSPITAL

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Introduction: The objective of this study was to determine whether preoperative low-dose ketamine reduces postoperative pain and analgesic consumption in children undergoing urological surgery.

Methods: 60 children scheduled for urological surgery were included in this prospective study. Anesthesia was performed with fentanyl and Isoflurane. 30 patients additionally received an intravenous bolus of ketamine (0.3 mg/kg) 3 min before anesthesia induction (Ketamine Group). Another 30 patients received a bolus infusion of saline (Control group). After transfer to the PACU, pain intensity was evaluated using a numeric rating scale (NRS). First patient analgesia request, cumulative analgesic consumption and pain intensities within the first 48h were recorded and compared.

Results: Analgesic consumption was significantly different during the first 20 h (Control: 1.2 mg/kg, Ketamine: 0.56 mg/kg). Differences were found in pain intensity during the first 26 hours postoperative hour (Control: 4.0, Ketamine: 2.5, $P < 0.05$) and in the time to first analgesic request (Control: 37, 28–46 min, Ketamine: 126, 78–141 min; $P < 0.05$).

DISCUSSION: : preoperative low-dose ketamine reduces pain intensity and analgesic consumption during the first 20h after surgery.

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