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Epidural versus Intravenous Analgesia for Pain Control in Kidney Donors

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Özet:

Introduction: Live donor nephrectomy is one of the treatment methods for end-stage kidney disease. Best care must be provided for donors, including their pain control after the surgery. Treatment options for postoperative pain, like iv intermittent analgesics, iv or epidural patient-controlled analgesia (PCA) systems are used in this manner. In this study we aimed to compare these three different modalities with respect to their analgesic efficacy in kidney donors. Secondary aim was to search for the possible relation between degree of kinship of donor and the postoperative pain.

Material and Methods: After Ethics Committee Approval, data of 58 live donor nephrectomy patients operated in a 7-year-period in an Educational and Research Hospital were analyzed. Data of the patients' postoperative analgesia methods (i.e., iv intermittent, iv PCA, and epidural PCA), surgical technique and duration, degree of kinship with the recipient, postoperative pain scores, and rescue analgesic and antiemetic use were obtained. Correlation of postoperative pain scores with the analgesia technique was investigated, as well as with the degree of kinship of the donor and recipient. Chi-Square test was used for the analysis of categorical variables, and One-way ANOVA or Kruskal-Wallis H test for the continuous.

Results: Patient-controlled systems provided better postoperative pain control, with the epidural PCA being the best. Rescue analgesic consumption was less in the patient-controlled analgesia systems. Postoperative antiemetic consumption was also less with the epidural PCA. No correlation was detected between the pain and the degree of kinship of the donor and recipient.

Discussion and Conclusion: Analgesia of live kidney donors is an important issue and should not be overshadowed. Epidural patient-controlled analgesia provides better postoperative pain control after live donor nephrectomy, compared with intravenous intermittent or patient-controlled system. No comment can be made regarding the effect of the degree of kinship on the postoperative pain scores.

Anahtar Kelimeler : analgesia, donor, kinship, postoperative analgesia, renal transplantation