

سامية محمد مصطفى



شبكة المعلومات الجامعية

بسم الله الرحمن الرحيم



سامية محمد مصطفى



شبكة المعلومات الجامعية



شبكة المعلومات الجامعية التوثيق الالكتروني والميكرو فيلم



سامية محمد مصطفى



شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

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بالرسالة صفحات لم ترد بالأصل



The Effects of "Three In One" Local Anaesthetic Block, Intra-articular Local Anesthetic Block and Intravenous Morphine on Postoperative Pain Relief After Diagnostic Knee Arthroscopy

*Thesis submitted for partial fulfillment of master degree
of anesthesia*

Merhan Fathy Abd Elhameed

M B, B.CH.,
Faculty of Medicine,
SUEZ CANAL UNIVERSITY.

SUPERVISORS

Prof. Fatma M. khamis

Professor of anesthesia,
Faculty of Medicine,
Suez Canal University.

DR. Magdy A. Omera

Assist. Professor of anesthesia,
Faculty of Medicine,
Suez Canal University.

DR. Tarek E. Ezz-Elarab

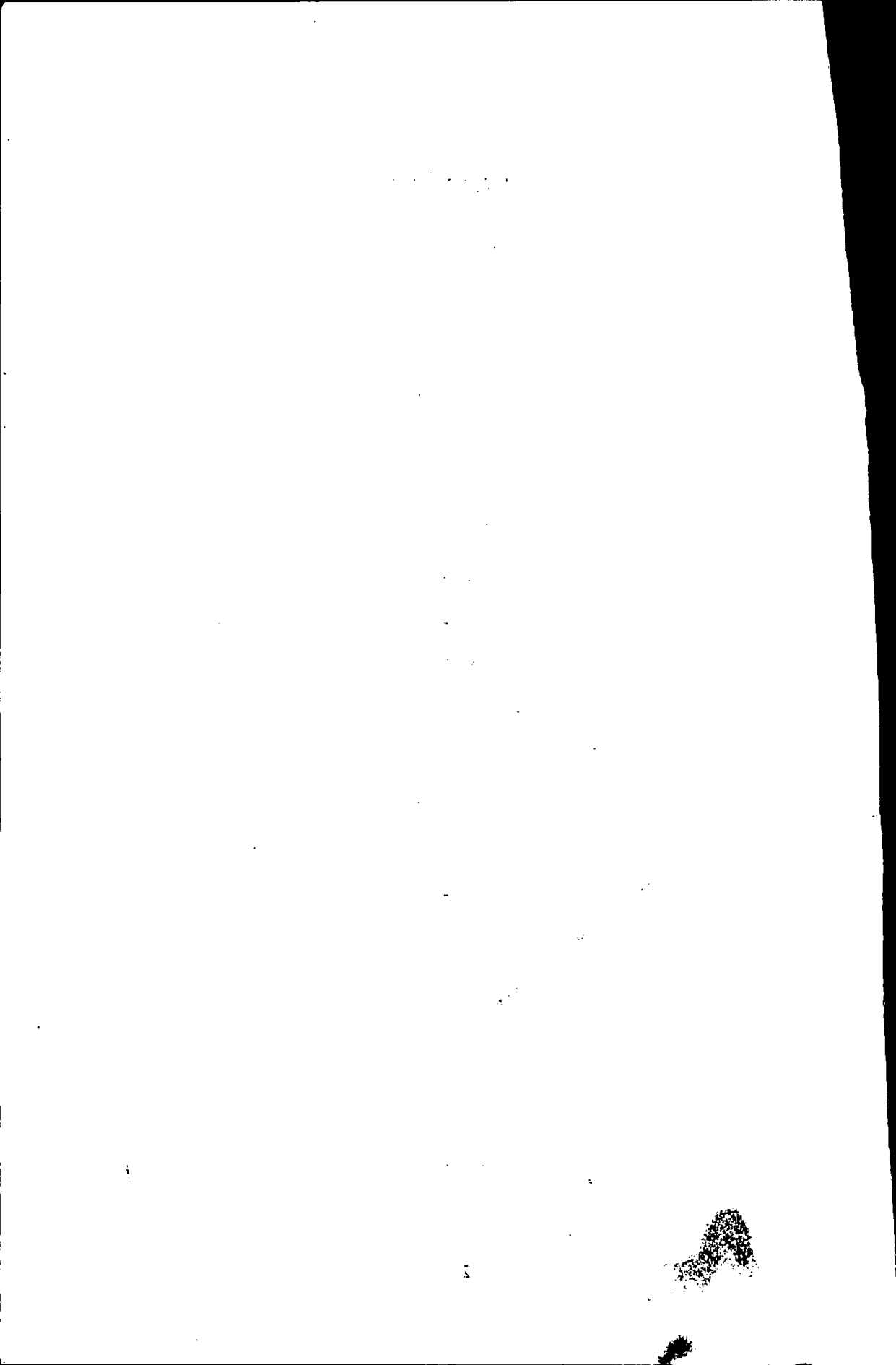
Lecturer of anesthesia,
Faculty of Medicine,
Suez Canal University.

Suez Canal University
Faculty of Medicine

2005

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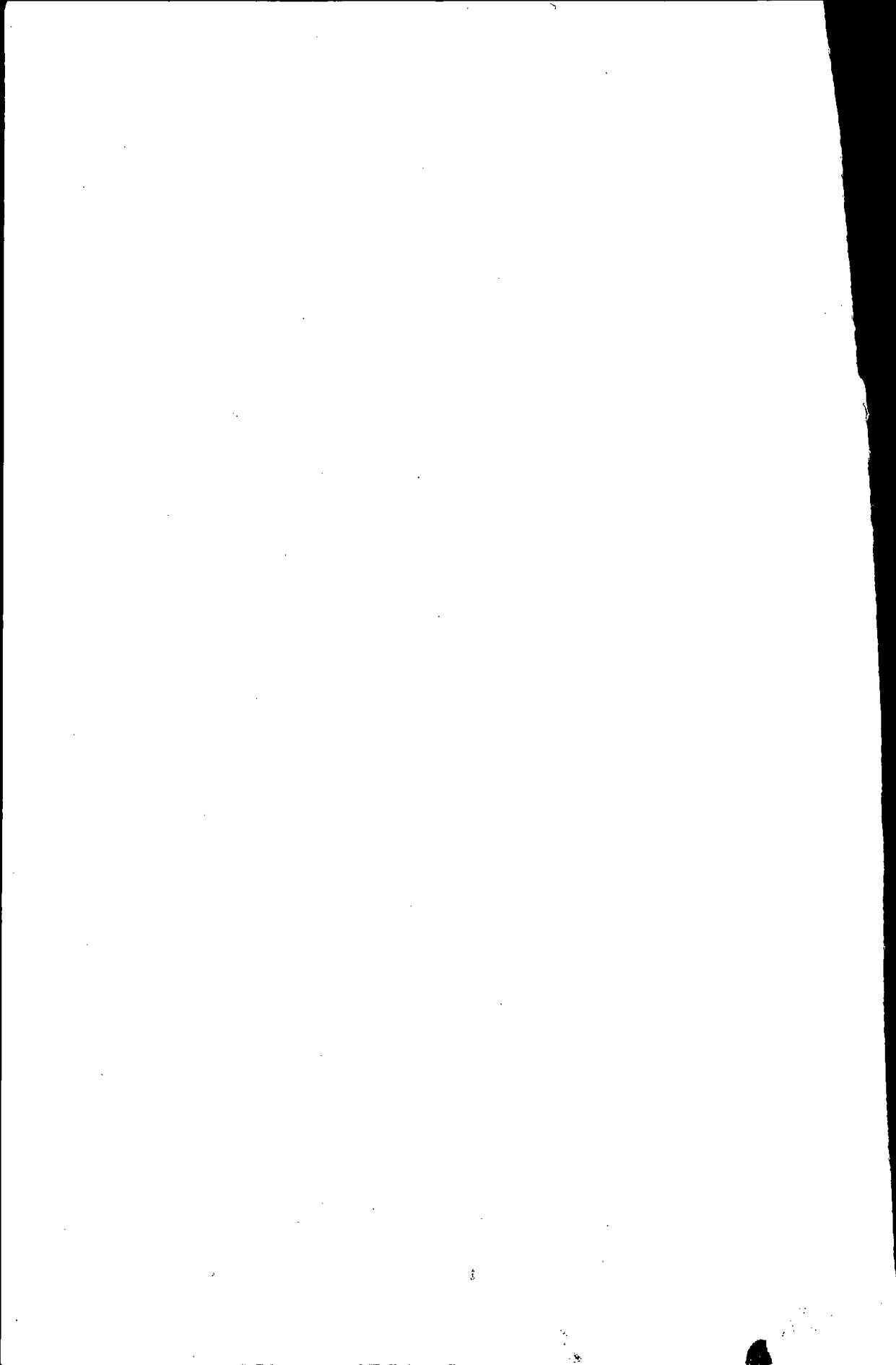
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Introduction
And
Aim of the work



INTRODUCTION

Although pain control occupies an unargued position in postoperative management, many questions concerning the role of analgesia on the post operative outcome, beyond the fundamental human aspect, remain to be resolved⁽¹⁾.

The International Association for the Study of Pain (IASP) defined pain as 'an unpleasant sensory and emotional experience associated with actual or potential tissue damage.'⁽²⁾

The effective relief of pain is of paramount importance to anyone treating patients undergoing surgery. This should be achieved for humanitarian reasons, but there is now evidence that pain relief has significant physiological benefit. Not only effective pain relief mean a smoother postoperative course with earlier discharge from hospital, but it may also reduce the onset of chronic pain syndromes⁽³⁾

The Knee arthroscopic surgery is a common procedure that is frequently associated with considerable postoperative pain that may be treated using regional anesthesia.⁽⁴⁾

Different techniques for post operative pain relief can be used in cases of knee arthroscopic surgery such as intra venous opioids, Intrathecal opioids or local anesthetics, epidural local anesthetic, and regional block (intra articular block, three in one block technique and femoral block).⁽⁵⁾

Morphine is widely used in the treatment of pain but it may be associated with significant side effect such as respiratory depression, urinary retention and prolonged postoperative ileus. ⁽⁶⁾

Patient Controlled Analgesia (PCA) became popular when it was realized that individual requirements for opioids varied considerably. Thus they can adjust the level of analgesia required, according to the severity of the pain. In theory, the plasma level of the analgesic will be relatively constant. ⁽⁷⁾

Three in one block technique (The inguinal para vascular approach to lumbar plexus blockade that means block of the femoral ,obturator and lateral femoral cutaneous nerves) first described by Winnie et al: 1973. ⁽⁸⁾

Three in one block technique(block of femoral, obturator and lateral femoral cutaneous) is indicated in anesthesia and analgesia of lower limb surgery, different local anesthetics may be used in the block as lidocaine ,bupivacaine ,mepivacaine ,and ropivacaine. ⁽⁹⁾

Three in one block technique approach based on the hypothesis that a large volume of local anesthetics placed in the femoral nerve sheath will spread proximally to lumbar plexus and block other branches including the obturator and lateral femoral cutaneous nerves. ⁽¹⁰⁾