



Perioperative Pain Management Strategies for Cancer Patients with Opioid Tolerance

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Introduction

- Perioperative pain management in opioid-tolerant patients presents unique challenges.
- Have increase pain in peri-operative period due to chronic pain and prolonged opioid use.
- Requires tailored approaches for safe and effective care.
- Our study aims to explore peri-operative pain management practices and outcomes in opioid-tolerant patients at tertiary oncology Centre

Aim and Objectives

Aim

- To investigate the perioperative pain management of opioid-tolerant patients within the context of our institute's clinical experience.

Objectives

- To retrospectively analyze the perioperative pain management of opioid-tolerant patients.
- To identify strategies in perioperative pain management of opioid-tolerant patients.

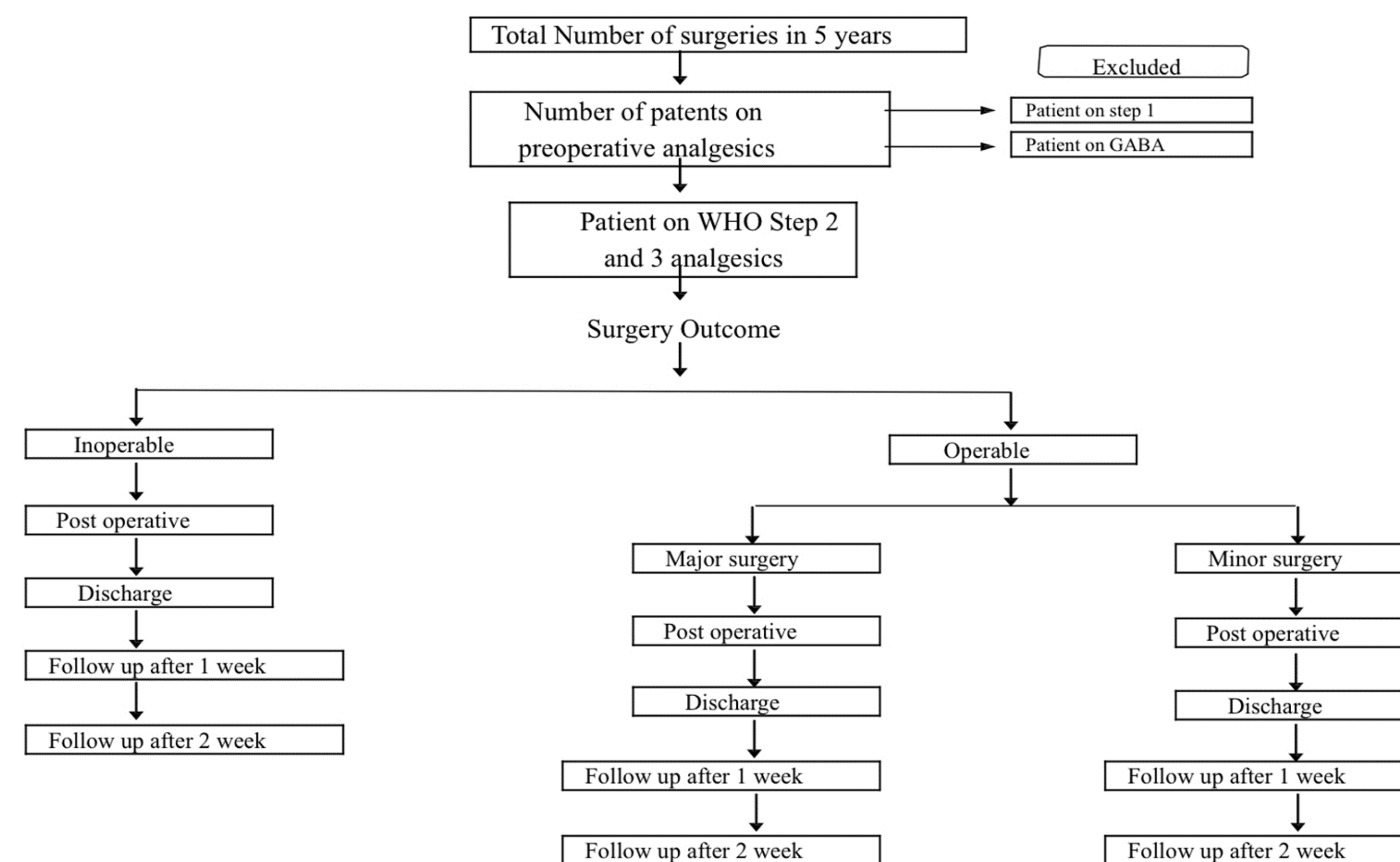
Methodology

- A Retrospective study in which we analysed perioperative pain management of opioid-tolerant patients at tertiary cancer centre, over a period of 5 years (January 1, 2019 and December 31, 2023)
- Retrospective data collection involved reviewing electronic medical records and anesthesia charts of eligible patients from the hospital database

Records were reviewed for

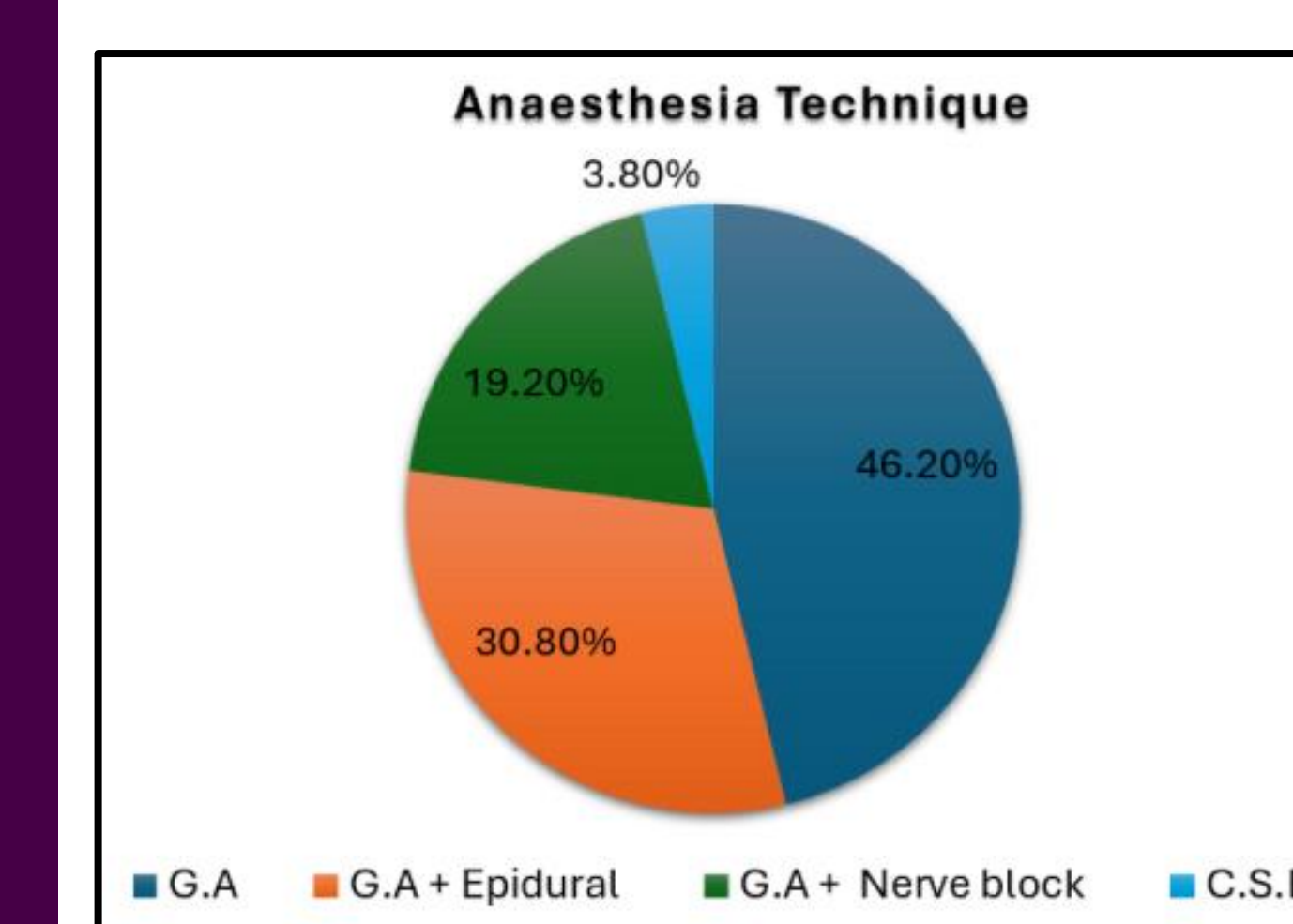
- Demographic information
- Preoperative opioid use details
- Surgery details
- Anaesthesia management
- Perioperative outcome
- Follow up

Consort



Results

- Overall 5325 patients (51.3% female; 85.9% >50 years) underwent surgery for cancer over the past 5 years. Out of which 2.57% (n =137) of them were preoperatively on opioids (Tb Morphine 58.4%, Fentanyl patch 2%, Tb Tramadol 37.2%).
- Use of opioids was most prevalent among patients with head and neck cancer (35.7% of n=49)



- Postoperatively, 26.4% of patients were discharged on opioids, reflecting a substantial need for ongoing opioid therapy. However, over the following weeks, there was a gradual reduction in opioid use, with only 4% of patients (primarily inoperable cases) still on TB Morphine at 2 weeks postoperatively.

Conclusion

- Our study demonstrates the importance of stratification on the basis of diagnosis and comorbidities,
- Acute pain management in these patients is governed by the principles of provision of good analgesia and avoiding opioid withdrawal
- Carefully planned and communicated discharge, with a weaning plan for additional opioids, is essential.

References

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