ABSTRACT

Background: Postoperative pain is an important issue after surgery. By giving proper analgesic(s), pain will be managed effectively and will accelerate patient recovery and discharge from hospital. Pain management in children is often poorly managed due to presumption that children do not suffer from pain. However, pain is affected by several factors include anxiety.

Objective: To analyse analgesic profile used postoperatively in pediatric patients

Methods: After obtaining approval from ethics committee, 122 patients were the subjects, aged 0-18 years, undergoing elective surgery in Dr. Soetomo Hospital Surabaya. Observation started at premedication room which preoperative anxiety and pain scale measured. Patients were given analgesic postoperatively and observed at 30 minutes, 1 hour, 2 hours, 1 day and 2 days postoperative. Observations included pain scale, sedation scale and hemodynamic (respiration rate, pulse, blood pressure and saturation). The results were analysed statistically using t Test, Mann-Whitney and Chi square test.

Results: NSAID was the most used analgesic in general (54 patients) and the most used analgesic in group with 0 pain scale (no pain) in all times of pain scale evaluation. Combined analgesics had bigger pain scale compare to single analgesic in almost all times of pain scale evaluation except 2 days postoperative. However, statistically there was no difference between giving single and combined analgesics in almost all times of pain scale evaluation except 2 days postoperative. While preoperative anxiety statistically correlates with postoperative pain at 2 hours postoperative.

Conclusion: There was difference between giving single and combined analgesics at 2 days postoperative evaluation (p 0.035). Preoperative anxiety correlate with postoperative pain at 2 hours postoperative evaluation (p 0.046).

Keywords: Pain, Anxiety, Sedation, FLACC, NRS, mYPAS, Ramsay Scale