major abdominal and thoracic operations.

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Abstract:

OBJECTIVE: To study the common methods of analgesia and their effectiveness in postoperative patients and to assess the occurrence of common post-operative complications related to pain. DESIGN: A prospective descriptive study. SETTINGS: Three general surgical wards and one cardiothoracic ward at the Kenyatta National Hospital, Nairobi, between 1st September 1996 and 30th November 1996. PATIENTS: One hundred and six adult patients admitted in the hospital for thoracotomy and/or laparotomy over a period of three months. RESULTS: Overall, 60% of the patients did not achieve adequate pain relief during the first 72 hours after surgery. Age, sex, weight, drug and type of operation did not influence pain score significantly. All but two patients were not prepared psychologically about expectations after surgery. Over ninety seven per cent received pethidine while 2.8% had morphine. The drugs were prescribed and administered with too little attention to the patient's response and too much concern about adverse effects and narcotic addiction. CONCLUSION: The results suggest that the standard of post-operative pain relief is poor. Patients need to be told more about what to expect (and demand). The medical and nursing staff need further education in how to prescribe and administer analgesia with reference to individual drug response. Other more effective methods of pain control should be introduced.