Abstract

Twenty patients, scheduled for minor gynaecological surgery, were studied. Anaesthesia was induced with propofol and maintained with oxygen, nitrous oxide and enflurane. Patients were randomly allocated to two groups: group 1 were given alfentanil 0.2 mg; group 2 were given morphine 5 mg. The rate of gastric emptying was measured indirectly by the paracetamol absorption technique. The results showed that morphine caused greater delay in gastric emptying compared with alfentanil (p < 0.05). The observed effect on gastric emptying rate may potentially affect the risk of peri-operative regurgitation and aspiration. This study provides further evidence that in short day-case procedures, when oral medication may be required postoperatively, alfentanil may be preferable to morphine as an intra-operative opioid.