

Annual Summit on **Surgery**

August 06-07, 2018 Prague, Czech Republic

> Nugusu Ayalew et al., J Univer Surg 2018, Volume: 6 DOI: 10.21767/2254-6758-C1-002

EFFECT OF SUB-HYPNOTIC DOSE OF PROPOFOL ON PREVENTION OF Postoperative nausea and vomiting as part of multimodal antiemetic in patients undergoing open abdominal surgery: A prospective cohort study, gondar university hospital, northwest ethiopia, 2016

Nugusu Ayalew², Hailu Yimer¹, Zewditu Abdisa¹ and Adugna Aregawi³

¹University of Gondar, Ethiopia ²Dilla University, Ethiopia ³Addis Ababa University, Ethiopia

Background: Postoperative nausea and vomiting (PONV) is one of the most common and unpleasant symptoms affecting patients undergoing abdominal surgery under general anesthesia. It is also associated with complications such as gastric aspiration, bleeding, dehydration, wound dehiscence and delayed hospital discharge.

Objective: The aim of this study was to assess the effect of a sub hypnotic dose of Propofol on the occurrence and severity of PONV after open abdominal surgery under general anaesthesia.

Materials & Methods: A series of 72 adult (age 18) ASA class I or II patients, scheduled for open abdominal surgery were divided into a control group (n¹/₄ 36) and a Propofol group (n¹/₄ 36). The Propofol group was given 30 mg of 1% Propofol IV bolus after skin closure. All episodes and severity of PONV during the first 24 h after anaesthesia were evaluated.

Results: The overall incidence of PONV was significantly lower in Propofol group than the non-Propofol group during the first six postoperative hours (30.6% versus 66.7% respectively; p¹/₄ 0.002). There was a significant reduction in number of patients needing rescue anti-emetic during the first six postoperative hours in Propofol group when compared with none-Propofol group [5 (13.9%) and 15 (41.7%) respectively, (p¹/₄ 0.009)]. There were no significant differences between the groups with regard to their haemodynamic parameters and manifestations of respiratory depression.

Conclusion & Recommendation: Administration of a sub hypnotic intravenous dose of Propofol was effective in reducing the incidence and severity of PONV, and the need for rescue anti-emetic during the first six postoperative hours in patients undergoing open abdominal surgery under general anaesthesia. We recommend the use of 30 mg Propofol at the end of open abdominal surgery as part of multimodal approach for PONV.

Biography

Nugusu Ayalew has completed his BSc in Anaesthesia in 2012 from University of Gondar and MSc in Advanced Clinical Anaesthesia in June 2016 from University of Gondar School of Medicine and Health science. He is the Head of Anaesthesia Department at Dilla University and working as a Senior Clinical Anaesthetist, Research Adviser and Lecturer. He has published more than 2 papers in reputed journals.

nugusu.ayalew@gmail.com