THESIS ABSTRACT

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TITLE : Comparative Evaluation Of Fascia Iliaca Compartment Block And Intravenous Fentanyl For Positioning During Spinal Anaesthesia In Fracture Femur Surgeries - A Randomized Controlled Study

PERIOD OF STUDY : February 2016 To July 2016

INSTITUTION : Government Kilpauk Medical College Hospital

BACKGROUND:

Spinal anaesthesia is the most commonly used anaesthetic technique for surgery of fracture femur. Severe pain acts as a deterrent to ideal patient positioning. Opioids and other systemic analgesics have been in use to provide pain relief and improve positioning while the peripheral nerve blocks have now come up as a safe and an effective alternative.

METHODS:

A Prospective, Randomized, single-blind, Controlled study was done to compare the efficacy of Fascia Iliaca Compartment Block under ultrasound guidance and intravenous fentanyl for positioning during spinal anaesthesia in fracture femur surgeries. 60 patients between 18 to 55 years were randomly allocated into two groups. Group FICB received 30ml of 0.25% bupivacaine under ultrasound guidance fifteen minutes before positioning. Group FENT received titrated doses of Inj.Fentanyl
0.5mcg/kg I.V. repeated to 3 doses (1.5 mcg totally) with an interval of 5 minutes between doses, the first dose given 15 minutes before positioning. Visual Analogue Scale score, quality of patient positioning, patient satisfaction, time to perform spinal anaesthesia and requirement of first rescue analgesic post op were compared between the two groups.

RESULTS:

VAS score during positioning in group FICB: 1.13 ± 1.25 versus FENT: 2.27± 1.55 (P=0.0029). Quality of patient positioning in group FICB: 2.43±0.63 versus FENT: 1.87 ±0.78 (P=0.0024). Patient satisfaction was better in group FICB (P=0.0284). Time taken to perform spinal anaesthesia in group FICB: 4.90±0.55 Versus FENT: 5.86 ±0.83 (P<0.0001). Requirement of first rescue analgesic was after 5.90±0.80 hrs in FICB group compared to 1.65±0.60 hrs in FENT group(P<0.0001).

CONCLUSION:

It is concluded that Fascia Iliaca Compartment Block is more efficacious than intravenous fentanyl for positioning during spinal anaesthesia in surgery for fracture femur. Fascia Iliaca Compartment Block provides superior analgesia, better quality of patient positioning, greater patient satisfaction thereby reducing the time taken to perform spinal anaesthesia in sitting position compared to i.v. fentanyl in surgery for femur fracture.

KEYWORDS:

Spinal anaesthesia, fracture femur, positioning, Fascia Iliaca Compartment Block, intravenous fentanyl.