ABSTRACT

**Objective.** Combined spinal and general anesthesia block and combined epidural and general anesthesia block in laparoscopic cholecystectomy were compared.

**Material and methods.** 40 consecutive patients who are posted for laparoscopic cholecystectomy surgeries are randomized into two groups: Group S and E, both performed with the use of quincke needle and tuohy needle respectively. For general anaesthesia routinely induced with any of the induction agents like thiopentone, propofol, ketamine.

**REGIONAL ANAESTHESIA**

Group S patients were placed in sitting or lying position on their left side and spinal anaesthesia was applied. The dural pucture was performed with quincke needle .Depending on the patient size 0.5% hyperbaric bupivacaine(10-20mg) were injected in sub arachnoid space.

Group E patients were placed in sitting or lying position on their left side and epidural anaesthesia was applied. The perforation was performed with 16G tuohy needle and position was confirmed by lose of resistant technique .After that injection 0.5%bupivacaine (2ml per segment) was given till T6-T12 segment level obtained.

Both group received general anaesthesia
**Results**: With respect to hemodynamic parameters, Group S had a lower blood pressure lower pain scores Group E patient had a increased incidence of nausea and vomiting when compared with group S.

**Conclusions**: The results of the present study show both combined techniques to be safe and efficacious, but show group S to have a faster recovery from anesthesia, less frequent nausea and vomiting and a shorter duration of postoperative pain.

**Key words**: Cholecystectomy. Laparoscopy. General anesthesia. Epidural anesthesia. Spinal anesthesia.