

**GABAPENTIN AS PRE-EMPTIVE ANALGESIC AGENT GIVEN TO ABDOMINAL  
HYSTERECTOMY PATIENTS FOR POST OPERATIVE ANALGESIA**

**ABSTRACT**

**AIM OF THE STUDY:**

To evaluate whether Gabapentin when given orally preoperatively at a dose of 300 mg has an effect on postoperative pain and analgesic requirement in patients undergoing total abdominal hysterectomy under spinal anaesthesia. The study also evaluates the side effects associated with administration of Gabapentin.

**MATERIALS AND METHODS:**

This is a prospective, randomised, double blinded placebo controlled study. This study was conducted in total of 60 patients who underwent elective abdominal hysterectomy in our institute. Patients were randomly allocated into two groups: Group G (Gabapentin Group) and Group P (Placebo Group). Patients in Group G received Gabapentin 300 mg orally and Group P patients received placebo capsules with sips of water two hours before surgery. Time since spinal anaesthesia to first requirement of analgesic (T), total analgesic requirement in first 24 hours, visual analogue scale (VAS) scores at rest and movement, Ramsay sedation score, side effects of the drug like somnolence, dizziness, confusion, nausea, vomiting were recorded in 0,2,4,6,12 hours postoperatively.

**RESULT:**

Single oral dose of Gabapentin 300 mg when given preoperatively reduces the postoperative pain scores and total tramadol consumption in patients undergoing abdominal hysterectomy under spinal anaesthesia. Sedation was the only significant side effect observed with the Gabapentin usage. Thus, Gabapentin can be considered as an adjunct in treating postoperative pain.

**CONCLUSION:**

This study demonstrates that a single oral dose of gabapentin 300mg when given preoperatively reduces the postoperative pain scores and total tramadol consumption in patients undergoing abdominal hysterectomy under spinal anaesthesia.

**KEYWORDS:** Gabapentin, Preemptive Analgesia, Hysterectomy, Pain.