

COMPARISON OF ANALGESIC EFFICACY BETWEEN CONTINUOUS INTERSCALENE BLOCK COMBINED SINGLE SUPRASCAPULARIS BLOCK AND CONTINUOUS INTERSCALENE BLOCK AFTER ARTHROSCOPIC SHOULDER SURGERY

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Background and aims: Interscalene brachial plexus block is an effective nerve block for shoulder surgery. This study evaluated the effectiveness of a Continuous Interscalene Block (CISB) by comparing it with that of a Continuous Interscalene Block combined with a Single Suprascapularis Block after arthroscopic shoulder surgery.

Methods: Patients who had undergone CISB (CISB group; n = 30) were compared with those who had undergone CISB -SSB (CISB -SSB group; n = 30) after surgery. There were no between-group differences in patient characteristics. An ultrasound-guided interscalene catheter targeting the C5-C6 roots/superior trunk was placed preoperatively. Bupivacaine 0.5% 15 mL was administered in CISB before surgery, and Bupivacaine 0.5% 15 mL+5 ml was administered in CISB -SSB before surgery accordingly. We used only neurostimulator for Suprascapularis Block. The both groups received a 4-mL/h infusion of bupivacaine 0.125%. Postoperative pain was expressed on a visual analog scale (VAS) at 2, 4, 6, 12, 24, and 48 hours. The visual analog scale (VAS) for pain, supplementary analgesics and adverse effects, level of patient satisfaction after 48 hours were recorded.

Results: VAS scores were lower in the CISB - SSB group in the first 12 hours, but were similar in the 24 and 48 hours (VAS: PO 12 hr p-value = 0.001, PO 24 hr p-value = 0.004). The level of patient satisfaction was higher in the CISB - SSB group.

Conclusions: CISB -SSB is more effective in the first 12 hours after shoulder surgery. Postoperative pain between 12 and 48 hours after surgery can be adequately managed with either CISB or CISB -SSB.