ANZCA
AUSTRALIAN AND NEW ZEALAND COLLEGE OF ANAESTHETISTS

MEDIA RELEASE

Friday June 15, 2012

Old drugs offer new uses for pain relief

Anaesthetists are finding new uses for older medications that are providing better pain relief for patients after surgery.

A meeting of anaesthetists in Sydney tomorrow will hear how drugs commonly used to treat epilepsy, and ketamine which is used in general anaesthesia, are now being used to reduce pain after surgery.

Dr Stephen Gibson, the director of pain services at Sydney's Royal Prince Alfred Hospital, says both medications offer new pain-relieving strategies that can have fewer side effects for patients.

He says gabapentinoids (gabapentin and pregabalin) were originally developed for the treatment of epilepsy, as they stabilise nerves, and also have been used in treating nerve pain.

He says new studies have shown that when given before and after major surgery, such as hysterectomies, lower-back surgery and knee and hip replacements, gabapentinoids can reduce pain for at least two days after surgery and possibly for up to six months.

"The benefits are that the patient's opioid dose is reduced by about a third, their pain scores are lower, and they have fewer side-effects from high-dose opioids, such as nausea and vomiting, constipation and respiratory depression," Dr Gibson says.

He says low doses of ketamine have also been found to be helpful to reduce pain for patients in whom high-dose opiate therapy can be ineffective.

This includes patients who are taking other drugs that block the effect of opioids; who are opioid-tolerant because they are already on high doses of opioids or have an opioid addiction; who may paradoxically suffer from increased pain when taking high-dose opioids; or who have nerve injuries where opioids have little or no pain-relieving effect.

"While great gains have been made in reducing the suffering caused by pain after surgery, and improvements have been made to allow patients to more safely use opioids after surgery, these new uses of older medications offer the potential to further improve patient outcomes," Dr Gibson says.

"Gabapentinoids and ketamine have been shown in trials to reduce pain in patients not responding to opioid pain relief, to reduce the side effects from opioids, and to reduce long-term pain complications after surgery."

New techniques reduce pain after knee replacement surgery

The conference will also hear of recent techniques that aim to improve pain management after knee replacement surgery and help rehabilitate patients as quickly as possible.

Dr Maroun Mallat, an anaesthetist at St Vincent's and Mater hospitals in Sydney, says knee replacement surgery is one of the most painful surgeries for a patient and usually is performed on people suffering from osteoarthritis of the knee.

He says recent studies have been looking at a technique where a high volume of local anaesthetic is injected into the knee joint and surrounding tissues for surgery. More anaesthethic may be administered after surgery through a catheter.

Another option is injection of local anaesthetics around the major nerves to the knee using ultrasound imaging to improve the precision and quality of pain relief.

"These techniques may fast-track a patient's recovery so they can leave hospital the day after surgery, rather than waiting about five to seven days to go home," Dr Mallat says.

To relieve further pain at home, the patient is given oral medication, such as a combination of slow-release opioids, anti-inflammatories, panadol and gabapentinoids, or pain patches.

Dr Mallat says helping patients to leave hospital sooner reduces the economic burden on the hospital and community, and also helps patients avoid possible hospital-acquired infections.

"Anaesthetists are looking for ways to minimise pain and the side effects from painkillers so patients can rehabilitate more quickly and get home faster following major knee operations," he says.

- **For more information about the conference, or to interview Dr Gibson or Dr Mallat, please contact ANZCA Media Manager Meaghan Shaw on +61 3 8517 5303, +61 408 259 369 or mshaw@anzca.edu.au. Follow us on Twitter @ANZCA.**