

## ABSTRACT

### “COMPARISON OF POSTOPERATIVE ANALGESIA AFTER INTRATHECAL NALBUPHINE WITH LEVOBUPIVACAINE AND FENTANYL WITH LEVOBUPIVACAINE AFTER GYNAECOLOGICAL SURGERY”

#### INTRODUCTION:

Spinal anaesthesia provides a rapid onset of anaesthesia & complete motor blockade also simple to perform. Adjuvants to local anaesthetics for intrathecal administration has synergistic action and intensify sensory block without increasing sympathetic block, reduced local anaesthetic drug dose, better hemodynamic stability with lesser side effects. The purpose of this study is to compare the intrathecal fentanyl & nalbuphine as an adjuvant to levobupivacaine during lower abdominal gynaecological surgeries for postoperative analgesia.

#### AIMS AND OBJECTIVES:

Comparison of post operative analgesic efficacy of intrathecal nalbuphine with levobupivacaine vs intrathecal fentanyl with levobupivacaine. Also assessment of onset of sensory and motor blockade ,intra operative and postoperative hemodynamics, effective analgesic time, evaluate the severity of pain using visual analog scale and side effects.

## **METHOD:**

This Prospective Randomized double blinded study has included 60 female patients who were divided into

**GROUP A** patients received 15mg (3ml) of 0.5% levobupivacaine and fentanyl 25µg-Total volume of drug is 3.5ml.

**GROUP B** Patients received 15mg (3ml) of 0.5% levobupivacaine and nalbuphine 0.5mg-Total volume of the drug is 3.5ml given.

## **RESULTS:**

This study concluded that prolongation of duration of analgesia with nalbuphine than fentanyl but there is no statistical significance in difference between nalbuphine and fentanyl when combined with levobupivacaine for spinal anaesthesia. The postoperative analgesia is similar with both the drugs. Adverse effects were less common in nalbuphine group but the difference was insignificant.

## **CONCLUSION:**

We conclude that both Intrathecal nalbuphine and intrathecal fentanyl added to levobupivacaine in spinal anaesthesia improves intraoperative analgesia and prolongs the early postoperative analgesia.

## **KEYWORDS:**

Intrathecal, Nalbuphine, Levobupivacaine, Fentanyl