

Gabapentin Premedication to Reduce Postoperative Nausea and Vomiting in Surgical Patient Receiving Spinal Morphine

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Background and Objective : The Intrathecal Administration of Morphine is gaining popularity. It is easy to do and it can reduce the pain after surgery which can last up to 24 hours, but it can cause postoperative nausea and vomiting more than any other method which is used to help reduce pain. Patients who suffer from these side effects most often have to spend a longer period of time recovering in the hospital. Patients are often afraid of surgery and the costs of medical treatment. The efficient reduction of postoperative nausea and vomiting will decrease the period of time spent in the hospital, decrease complications to the body and benefit treatments. This study aimed to investigate the results of administrating Gabapentin 600 mg to patients before surgery to help reduce the postoperative nausea and vomiting of those who receive the Intrathecal Administration of Morphine.

Methods : To study and compare the symptoms and severity of pain caused by Postoperative Nausea and Vomiting by 2 groups of patients. The first group received Gabapentin 600 mg and the second group received a placebo. Both groups received a standard medicine to protect them from postoperative nausea and vomiting. These patients had orthopedic surgery on their waist, hip, thigh and knee during the government

service period time which is not urgent in the operation rooms (Mondays-Fridays) at the faculty of Medicine, Khon Kaen university. The general anesthesia and regional anesthesia were injected along with the Intrathecal Administration of Morphine.

Results : The group that received Gabapentin 600 mg felt nauseated and vomited 14 (35%) and the group that received the placebo 14(35%) did not show any difference in symptoms that were of any statistical significance ($p = 1$). The severity of nausea and vomiting in the group which received Gabapentin 14 (35%) felt no statistical significant difference compared to the group which received the placebo 14 (35%) ($p = 1$).

Conclusions: The results showed that receiving Gabapentin 600 mg before surgery along with the standard medicine to protect the patient suffering from postoperative nausea and vomiting did not show any difference compared to the group of patients who received the Intrathecal Administration of Morphine with the placebo.

Keywords : Gabapentin, Postoperative nausea and vomiting, Spinal morphine

