









Risk factors for severe postoperative pain in laparoscopic gynecology: role of breath-holding duration

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Introduction

Potential role of baroreflex sensitivity in the functional state of the nociceptive and antinociceptive systems.

Breath-holding - a noninvasive and accurate assessment of the functional state of the cardiorespiratory system



Material and methods

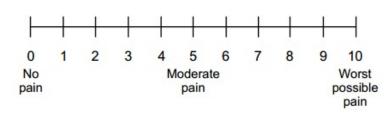
Data from 489 patients undergoing gynecological laparoscopy at the Clinic of the Kuban State Medical University from August 2019 to September 2023 were analyzed.

Objective

The aim of the study was to assess the relationship between the breath-holding test and postoperative pain and to develop a model for predicting pain after laparoscopic gynecological surgery.

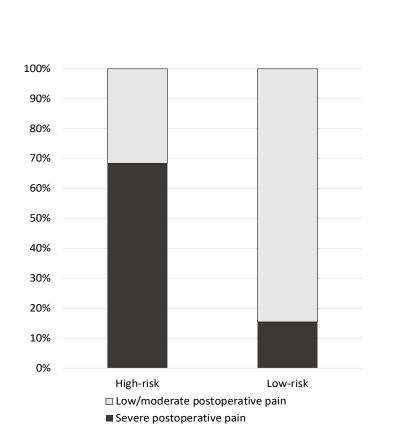


0-10 Numeric Pain Intensity Scale*



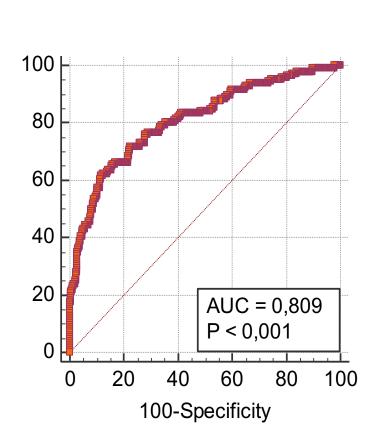
Results

Severe postoperative pain was reported in 146 patients (29.9%). The duration of breath-holding was statistically significantly longer in patients without severe pain.



Generalized Anxiety Disorder scale score, Pain Catastrophizing Scale score and duration of surgery were higher in patients with severe postoperative pain, endometriosis surgery was also the factor for severe postoperative pain (NRS 7-10).

AUROC for prognostic model was 0,81.



Conclusion

The breath-hold test, along with other factors, may be useful in assessing the risk of severe postoperative pain after laparoscopic gynecology.