

- A-855** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Perioperative Intravenous Lidocaine Reduces Postoperative Morphine Consumption after Abdominal Surgery Wolfgang Koppert, MD; Marc Weigand; Reinhard Sittl, MD; Werner Hering, MD; Jurgen Schuttler, MD, Department of Anesthesiology, University of Erlangen, Erlangen, Germany. Systemic lidocaine reduces postoperative pain possibly by preventing the induction of central hyperalgesia.
- A-856** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Intraspinal Methylprednisolone to Provide Long Term Analgesia in Patients with Intractable Post-Herpetic Neuralgia Naoki Kotani, M.D.; Tetsuya Kusbikata, M.D.; Misako Yodono, M.D.; Mizue Asai, M.D.; Akitomo Matsuki, M.D., Anesthesiology, University of Hirosaki, Hirosaki, Aomori-ken, Japan. Intraspinal methylprednisolone provided satisfactory analgesia for intractable postherpetic neuralgia.
- A-857** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Analysis of the Relationship between Activity and Pain in Chronic and Acute Low Back Pain John J. Liszka-Hackzell, MD; David P. Martin, MD, PhD, Department of Anesthesiology, Mayo Clinic, Rochester, MN, United States. We studied the relationship between pain and activity in patients with acute and chronic back pain. Our results suggest that activity exacerbates acute pain, but not chronic pain.
- A-858** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Comparison of Side Effects in Patients Receiving Combined Spinal Epidural Versus Epidural Analgesia after Accidental Dura-Arachnoid Puncture Timothy R. Lubenow, M.D.; Asokumar Buvanendran, M.D.; Trudi J. Leetz, R.N.; Anthony D. Ivankovich, M.D., Department of Anesthesiology, Rush Medical College, Chicago, IL, United States. Accidental dural puncture should not preclude epidural analgesia.
- A-859** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Effect of Continuous Infusion of Tramadol on Pain after Retropublic Prostatectomy Paulin Murayi, M.D.; Jean Joris, M.D.; Jean de Leval, M.D.; Maurice Lamy, M.D., Anesthesia and Urology, University Hospital of Liege, Liege, Belgium. Tramadol (150mg bolus+400mg/24h continuous infusion) significantly reduces postoperative opioid and other analgesic requirements after retropublic prostatectomy.
- A-860** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Analgesic Effect of Epidural Neostigmine after Abdominal Hysterectomy Masayasu Nakayama, MD; Shuji Yamamoto, MD; Hiromichi Ichinose, MD; Akiyoshi Namiki, MD, PhD, Anesthesia, Obihiro Kosei Hospital, Obihiro, Japan. Epidural neostigmine of 10 mcg/kg provides analgesic effect after abdominal hysterectomy.
- A-861** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Ketorolac Has Preemptive Analgesic Effects in Ankle Fracture Surgery Peter H. Norman, MD, FRCPC; M. Denise Daley, MD, FRCPC; Ronald W. Lindsey, MD, FACS; David Mansfield, Anesthesiology and Orthopedic Surgery, Baylor College of Medicine, Houston, TX, United States
- A-862** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Intraoperative Loading for Tramadol PCA - A Dose Response Study Wei W. Pang; Chib P. Hung; Da Chang; Min H. Huang, Anesthesiology, Show-Chwan Memorial Hospital, Chang-Hua, Taiwan, Taiwan. Intraoperative loading dose no more than 2.5 mg/kg together with metoclopramide plus tramadol for PCA, the nausea/vomiting can significantly be reduced throughout the whole tramadol PCA management.
- A-863** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Neostigmine Does Not Prolong the Duration of Analgesia after Popliteal Fossa Block with Mepivacaine Eric L. Pedicini, DO, MHPE; Carlos D. Franco, MD, PhD; David J. Bird, DO; Kenneth D. Candido, MD; James R. Markey, MD, Anesthesiology, Cook County Hospital, Chicago, IL, United States. Neostigmine added to a mepivacaine popliteal fossa block does not prolong postoperative analgesia.
- A-864** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Comparison of Phantom Sensations and Pain after Mastectomy with or without Breast Reconstruction Srinivasa N. Raja, M.D.; Rachel Vaslav, B.A.; Leslie Heinberg, Ph. D.; William Dooley, M.D., ACCM, Johns Hopkins Medical Institutions, Baltimore, MD, United States. Phantom breast sensations and pain occur in a third of patients and did not differ between women with or without breast reconstructive surgery.
- A-865** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Dose-Finding Study of Intrathecal Morphine in Patients Undergoing Total Hip Arthroplasty T. Reilley, DO, FCCM; E. Chen, MD; C. Michelson, MD; M. Gerhardt, MD, Ph.D, Department of Anesthesiology, The Ohio State University, Columbus, OH, United States. A dose ≥ 4 mcg/kg intrathecal morphine is required for effective analgesia in THA. Side effects increase at ≥ 7.5 mcg/kg.
- A-866** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Ketamine and Post Operative Pain in Thoracic Surgery Patrick Reynier, MD; Philippe Valat, MD; Jean-Benoit Corcuff, PhD; Guy Simonnet, PhD; Gerard Janvier, MD, DAR II, Groupe Hospitalier Sud, Bordeaux-Pessac, France. NMDA antagonist improves the efficiency of morphine induced analgesia.
- A-867** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
Intravenous Butorphanol Reduces Analgesia but not Pruritus or Nausea Associated with a Low-dose Intrathecal Morphine Tetsuya Sakai, M.D.; Taku Fukano, M.D.; Koji Sumikawa, M.D., Anesthesiology, Sasebo Kyosai Hospital, Sasebo, Nagasaki, Japan. Prophylactic intravenous butorphanol reduces analgesia but not pruritus or nausea associated with a low-dose intrathecal morphine.
- A-868** Room B, 10/16/2000 9:00 AM - 11:00 AM (PS)
The Management of Visceral Abdominal Cancer Pain by Percutaneous Neurolytic Procedures. Is There Still a Role for Them in the 3rd Millenium? Tarek Mohamed Sarhan, M.D.; Saad Abd Sbetta, M.D., Anaesthesiology, Faculty of Medecin Alexandria University, Alexandria, Egypt. This study evaluated The PNP, TIEDDS, the oral drugs for cancer pain. still there a great role for PNP.