

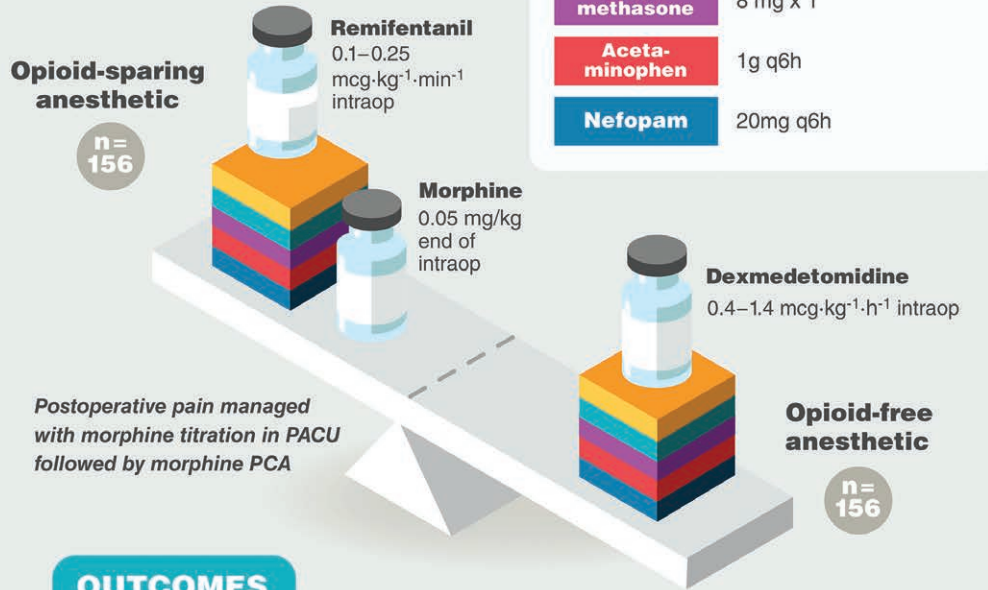
INFOGRAPHICS IN ANESTHESIOLOGY

Complex Information for Anesthesiologists Presented Quickly and Clearly



Bringing Back the Balance Opioid Reduction in Anesthesia

In this issue, Beloeil *et al.*¹ present a trial of 312 noncardiac surgery patients randomized to opioid-free vs. opioid-sparing anesthetic. All patients received a multimodal bundle.



OUTCOMES

Opioid-related adverse events

(Hypoxia, ileus, cognitive dysfunction)

67% of opioid-sparing vs. 78% of opioid-free
RR 1.16 (95% CI, 1.01–1.33, *P*=0.031)

48h postop morphine consumption

11 (5–21) vs. 6 (0–17) mg
Median difference 3.3 mg (95% CI, 0.8–5.7)

PONV

37% vs. 24%
RR 0.64 (95% CI, 0.45–0.90)

The trial was stopped prematurely due to 5 cases of severe bradycardia in the opioid-free group, including 3 episodes of asystole. Analgesia was similar between groups.

Compared to an opioid-sparing approach, an opioid-free approach using dexmedetomidine resulted in more adverse events.

Intraop, intraoperative; PACU, postanesthesia care unit; PCA, patient-controlled analgesia; PONV, postoperative nausea and vomiting; RR, relative risk.

Infographic created by Jonathan P. Wanderer, Vanderbilt University Medical Center, and James P. Rathmell, Brigham and Women's Health Care/Harvard Medical School. Illustration by Annemarie Johnson, Vivo Visuals. Address correspondence to Dr. Wanderer: jon.wanderer@vumc.org.

1. Beloeil H, Garot M, Lebuffe G, Gerbaud A, Bila J, Cuvillon P, Dubout E, Oger S, Nadaud J, Becret A, Coullier N, Lecoer S, Fayon J, Godet T, Mazerolles M, Atallah F, Sigaut S, Choinier P-M, Asehounne K, Roquilly A, Chanques G, Esvan M, Futier E, Laviolle B, POFA Study Group, SFAR Research Network: Balanced opioid-free anesthesia with dexmedetomidine versus balanced anesthesia with remifentanyl for major or intermediate noncardiac surgery: The Postoperative and Opioid-free Anesthesia (POFA) randomized clinical trial. *Anesthesiology* 2021; 134:541–51