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Post hemorrhoidectomy pain control: rectal Diclofenac versus Acetaminophen


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Abstract:

Background: Anal surgeries are prevalent, but they didn't perform as outpatient surgeries because of concerns about postoperative pain. The aim of the present study was to compare the effects of rectal acetaminophen and diclofenac on postoperative analgesia after anal surgeries in adult patients.

Methods: In a randomized, double-blinded, placebo-controlled study 60 ASA class I or II scheduled for haemorrhoidectomy, anal fissure or fistula repair, were randomized (with block randomization method) to receive either a single dose of 650 mg rectal acetaminophen (n=20), 100 mg rectal diclofenac (n=20) or placebo suppositories (n=20) after the operation. The severity of pain, time to first request of analgesic agent after administration of suppositories and complications were compared between three groups. Pain scores were evaluated in patients by Visual Analogue Scale (VAS) in 0 (after complete consciousness in recovery), 2, 4, 12 and 24 hours after surgery. The period between administration of the suppositories and the patients' first request to receive analgesic was compared between groups.

Results: Pain scores were lower significantly in rectal diclofenac than the other groups. The period between administration of the suppositories and the patients' first request to receive analgesic in diclofenac group was 219±73 minutes, was significantly longer compared with placebo (153±47 minutes) and acetaminophen (178±64 minutes) groups. No complications were reported.

Conclusions: Diclofenac suppository is more effective than acetaminophen suppository in post hemorrhoidectomy pain management.

Keywords:

Suppository , diclofenac , acetaminophen , hemorrhoid , pain , surgical procedure

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