Simultaneous Administration of Pregabalin and Loxoprofen Provides Superior Acute Pain Relief after Thoracic Surgery

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Abstract

Introduction: Administering nonsteroidal anti-inflammatory drugs (NSAIDs) alone are not always sufficient for acute postoperative intercostal pain relief after thoracic surgery. We evaluated the efficacy of combined administration of pregabalin and loxoprofen compared to continuous ropivacaine epidural infusion.

Methods: From April to October 2011, 40 patients underwent thoracic surgeries at our institution. Postoperatively, continuous epidural analgesia with 0.2% ropivacaine hydrochloride was administered to 20 patients (Epidural group), and one pregabalin 75 mg capsule and one loxoprofen 60 mg tablet were administered orally twice a day to the other 20 patients (Pregabalin group). The total numbers of additional analgesics required from the day of surgery to postoperative day 2 were statistically compared between the groups. There were three additional pro re nata (p.r.n.) analgesics offered: loxoprofen 60 mg tablet, diclofenac sodium 25 mg suppository, and pentazocine 15 mg intramuscular injection. Retrospectively, the total number of p.r.n. administration was counted based on the medical records' documentations.

Results: The mean number of p.r.n. analysesics administered was significantly lower in the pregabalin group $(2.4 \pm 1.8 \text{ vs. } 1.2 \pm 1.4 \text{ times}; p = 0.034)$.

Conclusion: Pregabalin can significantly augment the analgesic effect of NSAIDs for acute postoperative pain after thoracic surgery.

Key words: Pregabalin; Postoperative pain; Thoracic surgery, Analgesia

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