



Effect of Preoperatively given Intravenous Dextrose on Postoperative Nausea in patients undergoing Laparoscopic Cholecystectomy – A double blind, randomised controlled trial

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Abstract:

Nausea and Vomiting are one of the most common complications after major surgeries that may cause dehydration, water and electrolytes imbalance, aspiration pneumonia, wound dehiscence and prolonged hospital stay. This double blind, randomized controlled trial was conducted on patients undergoing laparoscopic cholecystectomy in Holy Family Hospital, Rawalpindi after ethical approval from Rawalpindi Medical University. A total of 100 patients, American Society of Anaesthesiology (ASA) grade I or II, non smokers, undergoing laparoscopic cholecystectomy were included in this study using simple randomized sampling technique. However, patients who were diabetic, hypertensive, pregnant, unable to understand visual analogue scale, discharged before 24 hours of post operative monitoring and those who refused to participate in the study were excluded. Equal numbers of patients (50 each) were included in both study groups: those receiving Ringer’s Lactate (Group R) or those receiving 5% Dextrose Solution (Group D) pre operatively. The primary outcome of this study was measured by comparing between both groups the post-operative nausea score at 30 minutes, 60 minutes, 6 hours, 12 hours and 24 hours which was measured using Verbal Analogue Scale. Data was entered and analysed using Statistical Package for the Social Sciences (SPSS v22). There were 29 male and 71 female patients. Mean age was 42.52 ± 14.49 whole Mean Duration of surgery was 43.06 ± 18.52 . Major findings of this study were that post-operative nausea score was sig-



nificantly lower in patients that were pre operatively given 5% dextrose as compared to the patients being given ringer’s lactate and that post operative nausea score was neither affected by gender nor by presence or absence of bile leakage during surgery. Pre operatively given intravenous dextrose significantly reduces post-operative nausea as compared to control.

Biography:

Zuhair Ali Rizvi is a House Surgeon in Surgical Unit I, Holy Family Hospital, Rawalpindi, Pakistan. He graduated from Rawalpindi Medical College (University of Health Sciences, Lahore) in 2019. He holds a BSc. English and MBBS degree. He has multiple publications in many renowned journals of the world including British Medical Journal Open Gastroenterology. He has made 50+ research presentations. He was president of Rawalian Students Research Society. As president, he organized National Medical Researchers Forum (RECON 2018) in which 72 medical colleges of Pakistan participated.

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