

Preoperative Bilateral Erector Spinae Plane
Blocks Decrease Inpatient Admission
Following Robotic Sleeve Gastrectomy

 **Olivia Vetter MD**, Richard Marks MD, Fernando Vazquez MD, Christopher Chiang MD

INTRO

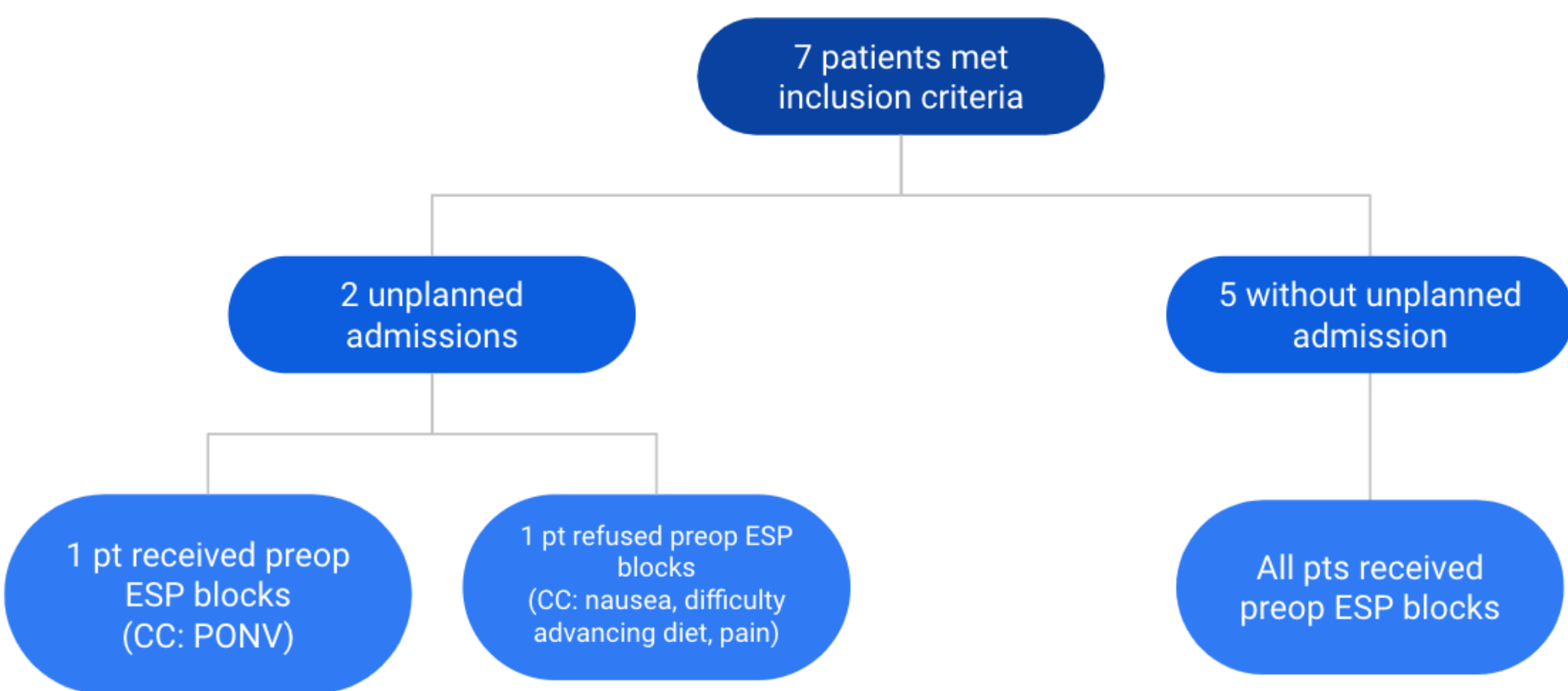
- Growing prevalence of obesity, advances in surgical techniques, overall increase in bariatric procedures → implementation of outpatient bariatric programs
- Uncontrolled postop pain remains a barrier for same day discharge
- US guided bilateral ESP blocks → decreased pain and analgesic consumption following laparoscopic bariatric surgery
- Minimize unanticipated hospital admission following outpatient sleeve gastrectomy?

METHODS

- Patients who met outpatient surgery center criteria undergoing robotic sleeve gastrectomy between 7/1/22 – 6/30/23
- Protocol created for robotic sleeve gastrectomy patients, emphasizing opioid minimization and PONV prophylaxis
- **Primary outcome:** unplanned hospital admission
- **Secondary outcome:** postoperative opioid consumption in MMEs

RESULTS

- Primary outcome:



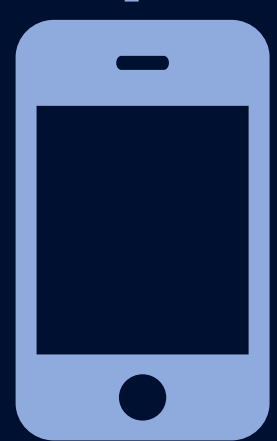
- Secondary outcome:
 - 6 pts who received preop ESP blocks consumed an average of **7.6** MMEs vs 1 pt who refused blocks consumed **12.7** MMEs

DISCUSSION

- We aim to improve the multimodal analgesic approach with coordinated PONV prophylaxis to make outpatient bariatric sx more feasible
- Future studies with greater power needed to further elucidate the role of preop ESP blocks in a standardized multimodal approach to this subset of pts



For patients undergoing outpatient
robotic sleeve gastrectomy,
preoperative bilateral ESP blocks may
both reduce unanticipated inpatient
admission as well as decrease the
MMEs required for adequate pain
control postoperatively.



Baseline Characteristics	Unplanned admission	No unplanned admission
	<i>(N=2)</i>	<i>(N=5)</i>
Female, <i>n</i> , (%)	2 (100)	5 (100)
Age, years, mean	39.2	31
Race, <i>n</i> (%)		
Black or African American	1 (50)	4 (80)
Non-Hispanic White	1 (50)	0 (0)
Hispanic White	0 (0)	1 (20)
Preop BMI, <i>kg/m²</i> , mean	37.94	42.97
ASA classification, <i>n</i> (%)		
ASA III	2 (100)	5 (100)
Comorbidities, <i>n</i> (%)		
HTN	0 (0)	2 (40)
Diabetes	1 (50)	1 (20)
GERD	0 (0)	2 (40)
OSA	0 (0)	3 (60)
Smoker	0 (0)	1 (20)
Liver disease	1 (50)	0 (0)
Heart failure	0 (0)	1 (20)
Preop functional status, <i>n</i> (%)		
METS >4 (%)	2 (100)	5 (100)
Preop lab values		
Hgb, mean, <i>g/dl</i>	13.1	13.0
Creatinine, mean, <i>mg/dl</i>	0.78	0.8

