

EFFICACY OF ERECTOR SPINAE PLANE BLOCK IN BARIATRIC AND METABOLIC SURGERY: A SYSTEMATIC REVIEW AND META-ANALYSIS OF RANDOMIZED CONTROLLED TRIALS

Lucas Caetano,¹ Vanessa Tapioca,² MD, Clara Pontual³

¹Federal University of Paraíba, ²Bahiana School of Medicine and Public Health, ³University of Pernambuco

BACKGROUND

- Postoperative pain is a major concern in bariatric and metabolic surgery, especially given the need to minimize opioid use due to the associated risk of complications in patients with obesity.
- The Erector Spinae Plane Block (ESPB) has emerged as a promising analgesic technique for these patients. However, its effectiveness and safety have yet to be fully established.

METHODS



→ January 2025

R 4.2.2

ESPB

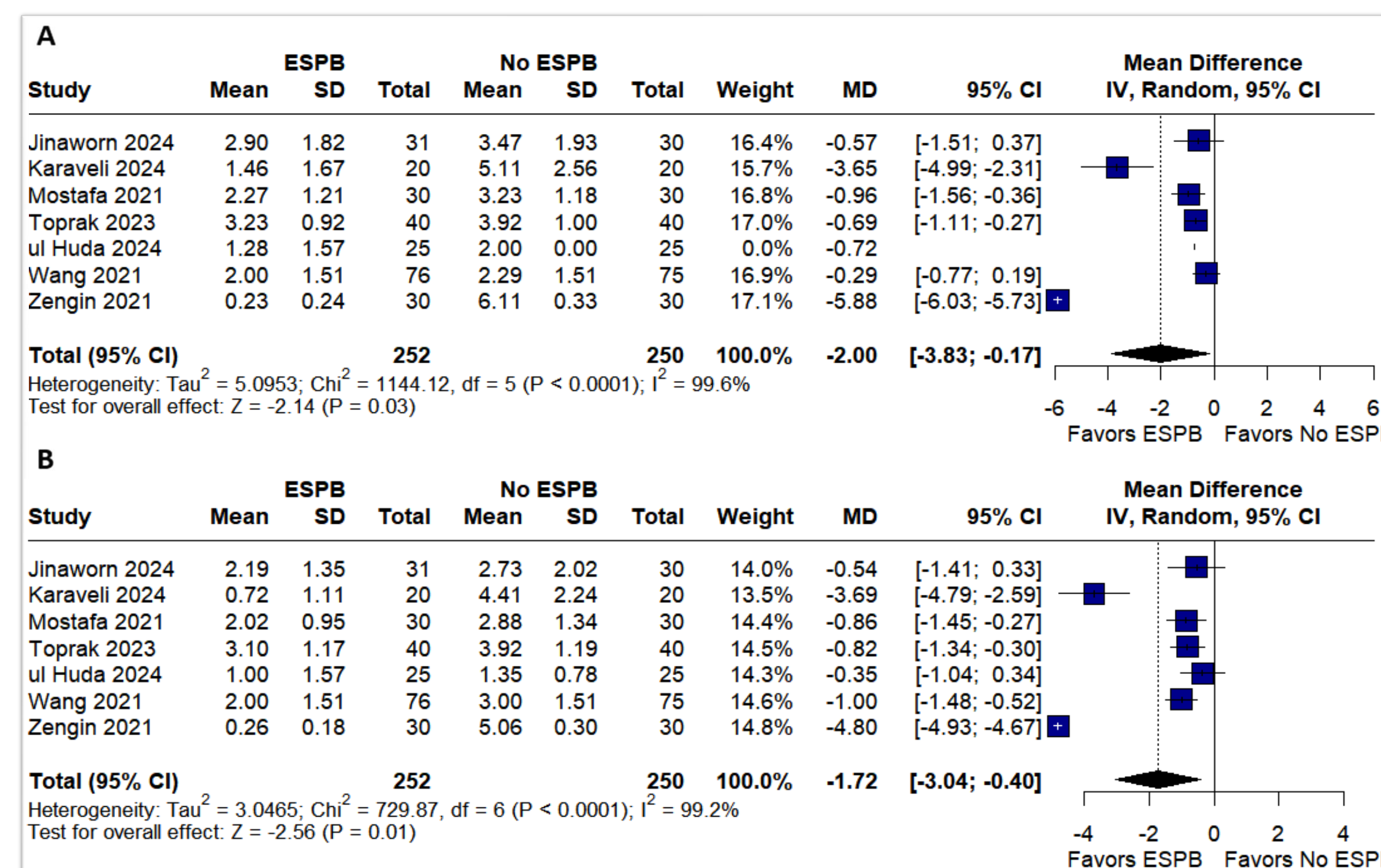
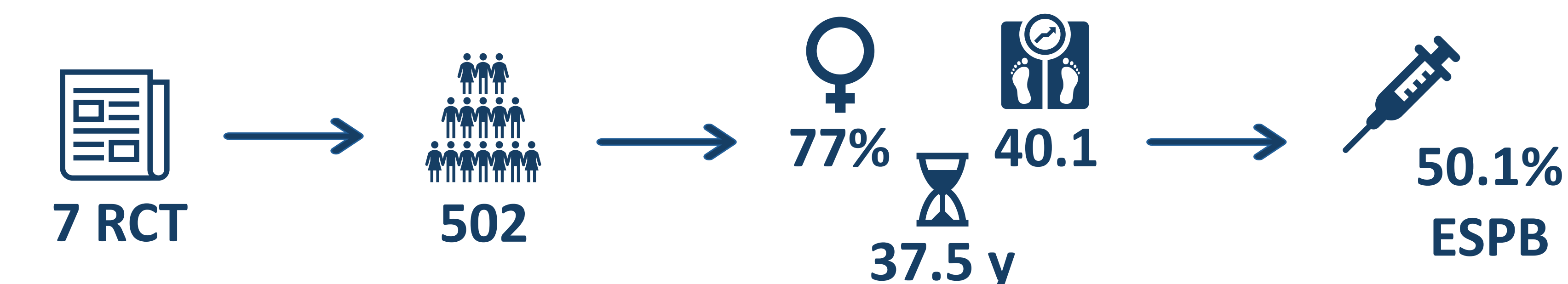
vs.

**NO
BLOCK**

RCT

- Pain at rest (6h, 12h)
- Pain on movement (6h, 12h)
- Cumulative morphine consumption
- Intraoperative fentanyl consumption
- Postoperative nausea and vomit

RESULTS



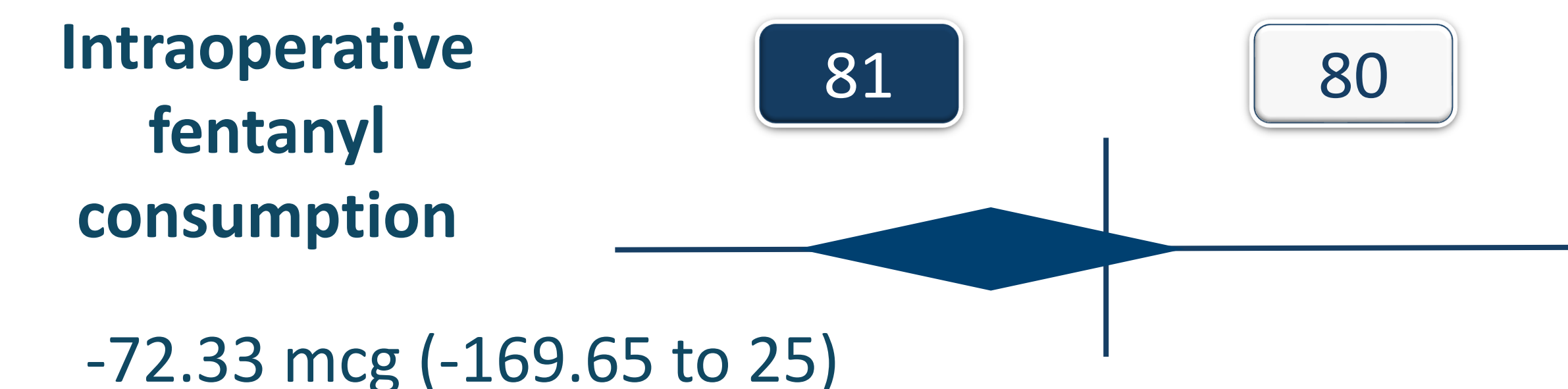
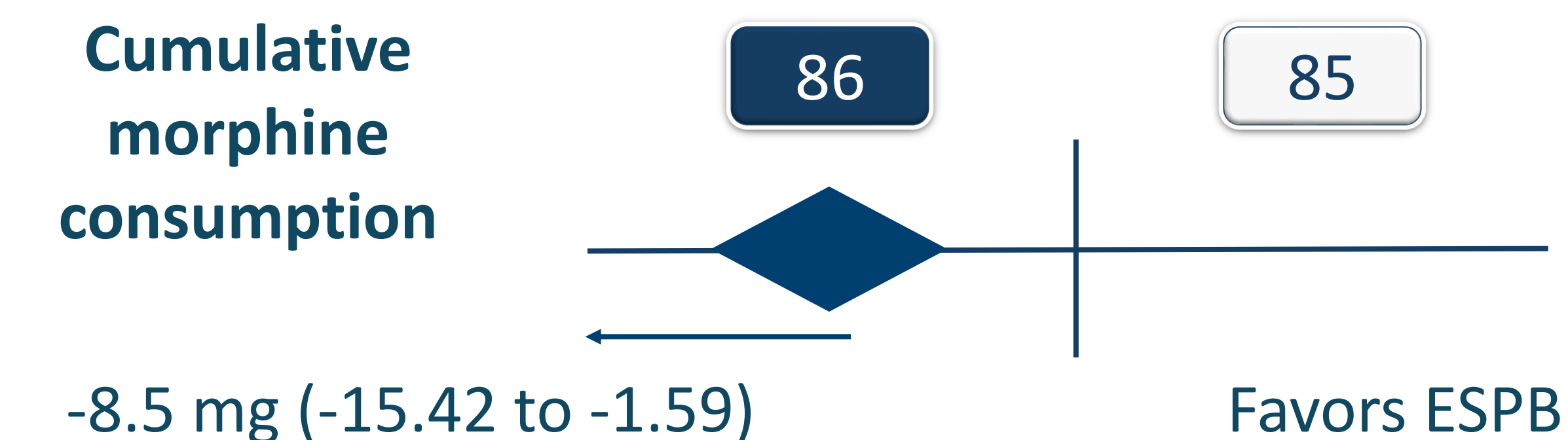
Significantly lower

Pain at rest
(A 6h, B 12h)

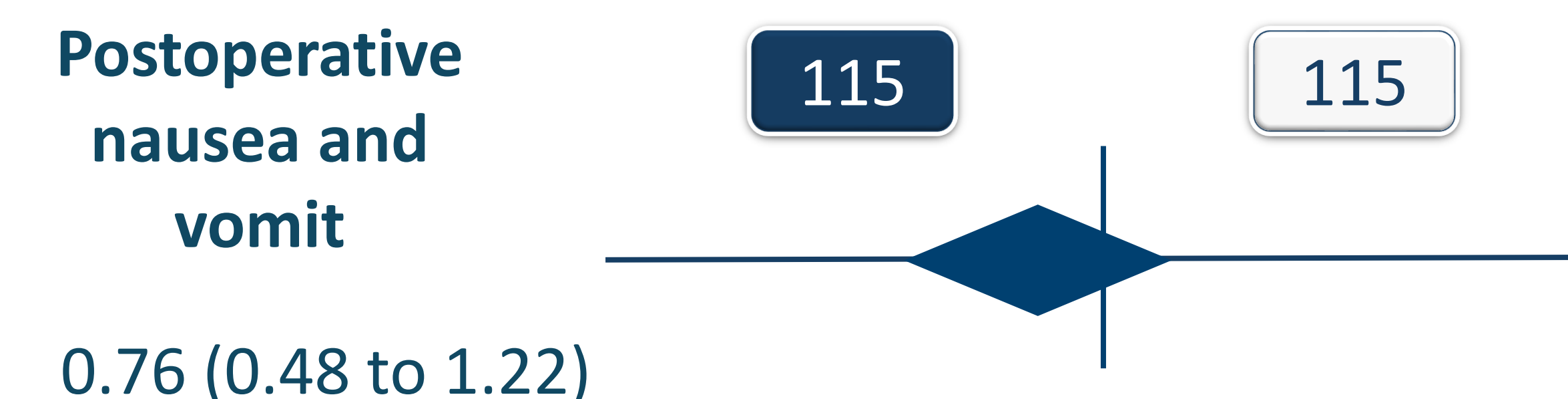
Pain on movement
(A 6h, B 12h)

DISCUSSION

Mean Difference, 95% CI



Risk Ratio, 95% CI



- ESPB is an effective analgesic technique for patients undergoing bariatric and metabolic surgery, reducing morphine consumption and pain scores at multiple postoperative time points.
- Given the potential for opioid-sparing benefits without added complications, ESPB appears to be a safe and useful component of multimodal analgesia protocols in this high-risk population.