

Evaluation of the Frequency and Intensity of Acute Postoperative Pain in Orthopedic Surgery Patients at the Hospital de Clínicas “Dr. Manuel Quintela”

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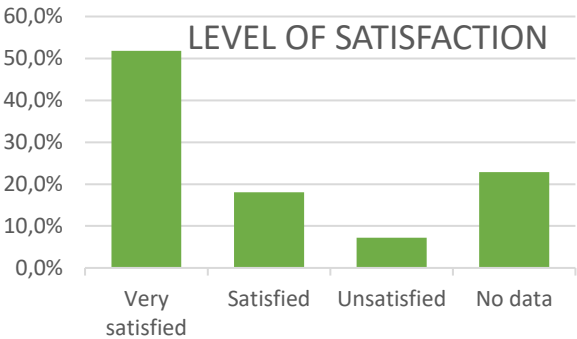
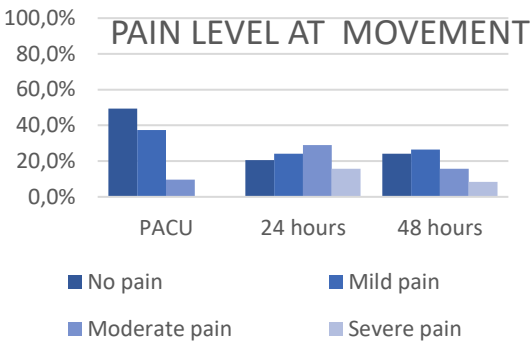
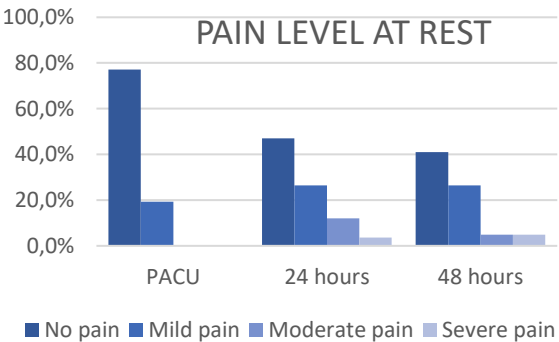
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Introduction:
Acute postoperative pain is common especially in traumatological procedures. In Latin America, around 40% suffer from severe pain. This pain impacts patient well-being, prolongs hospital stays, increases morbidity and mortality, and additional healthcare costs. Multimodal analgesia strategies improves pain control, optimizes recovery, and reduces costs associated with complications. This study evaluated postoperative pain in patients scheduled for traumatological surgery

Methodology:
A prospective, descriptive, and observational study was conducted in patients scheduled for traumatological surgery. We recorded: pain level, opioid consumption, and the presence of complications. Data were collected at discharge from the Postanesthesia Recovery Unit (PACU) 24 and 48 hours postoperatively. Patient satisfaction was also evaluated.

Results:
83 patients. Multimodal analgesia plan.
65.07% Regional Techniques. 8.43% intrathecal morphine
Pain at Rest: At discharge from the PACU 19.2% .Adequate pain control in 96.3% of patients.
At 24 hours: 47.0% reported no pain. No mild or severe Pain
At 48 hours: Adequate control in 67.5% of patients.
Pain at movement: at discharge from the PACU Adequate control in 86.7%.
At 24 hours: Adequate control in 44.5% of cases.
At 48 hours: Adequate control in 50.6%
Rescue administration of morphine:
26.5% of patients in the PACU (Mean doses of 0.85 mg)
42.2% at 24 hours (Mean doses of 1,46 mg) 62.7% at 48 hours (Mean doses of 1,98 mg)
86.7% of patients did not experience complications in the PACU or at 24 hours postoperatively
At 48 hours, 4 cases of nausea and vomiting.
Patient satisfaction was evaluated in 77.1%:
51.8% rated their experience as very satisfactory
18.1% satisfactory
7.2% unsatisfactory,



Conclusion:
The study demonstrates that **most** patients achieved adequate postoperative pain control, especially at discharge from the PACU; however, this control diminished over time, particularly during movement. **These findings highlight the need to adjust the analgesic treatment as recovery progresses.** Complications were minimal, and most patients were satisfied with the care they received.