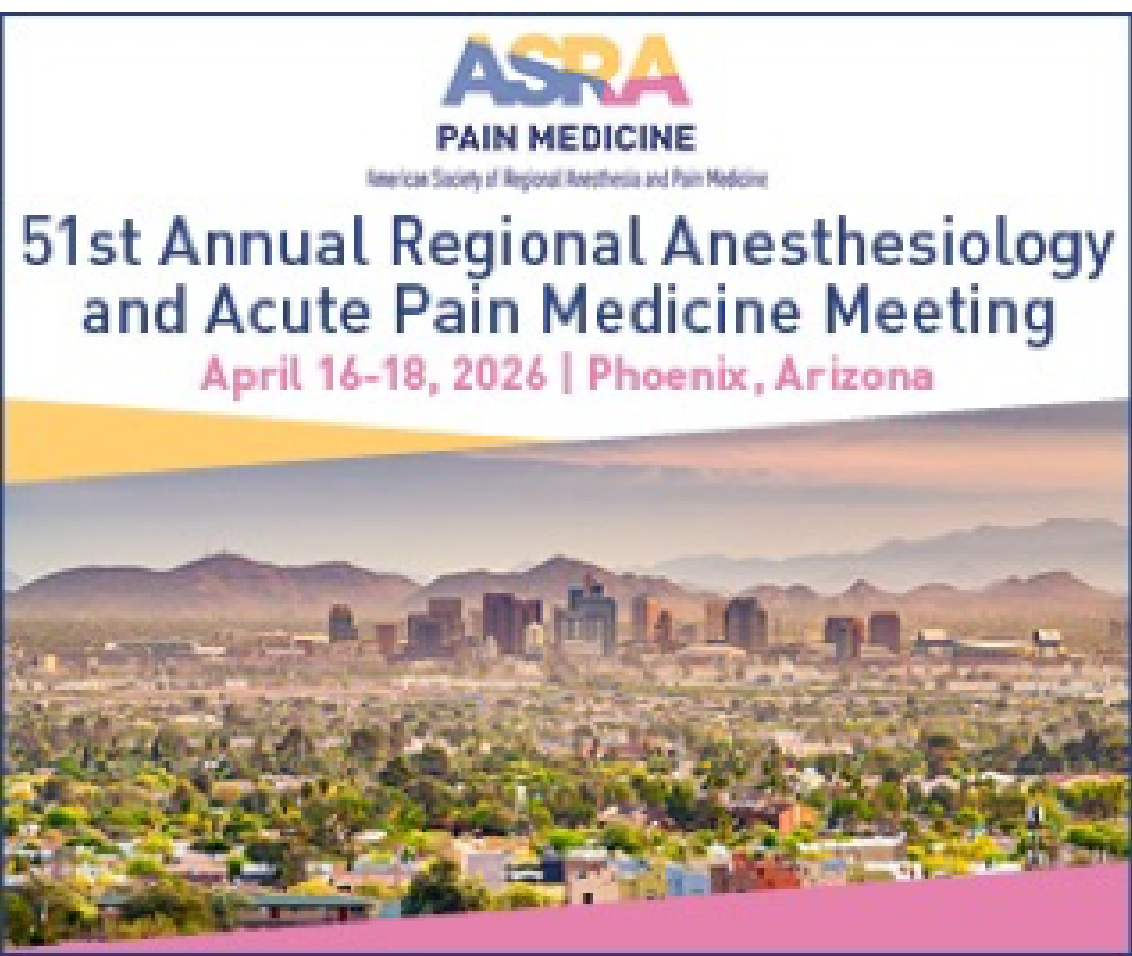
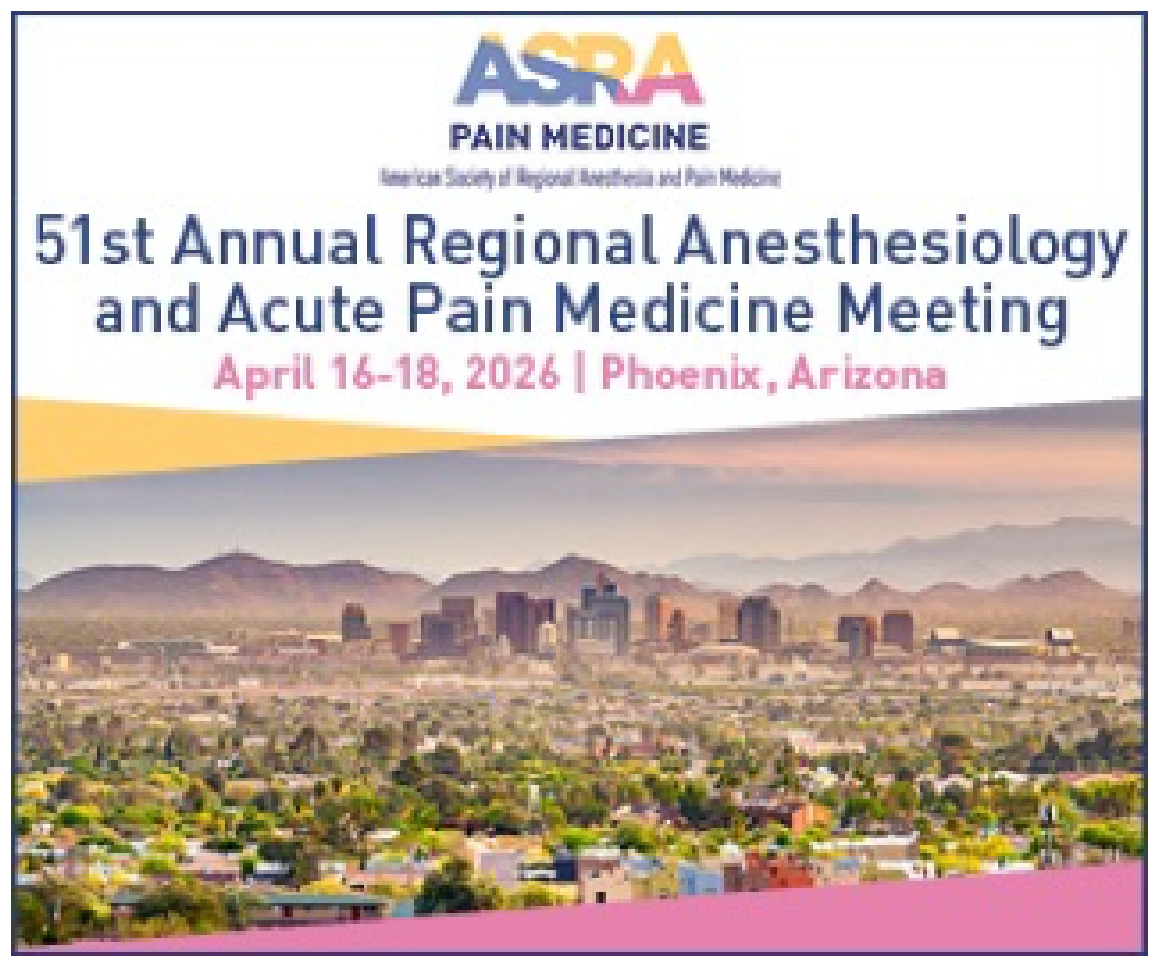




PRESENTER:

Gabriel B. Carvalho

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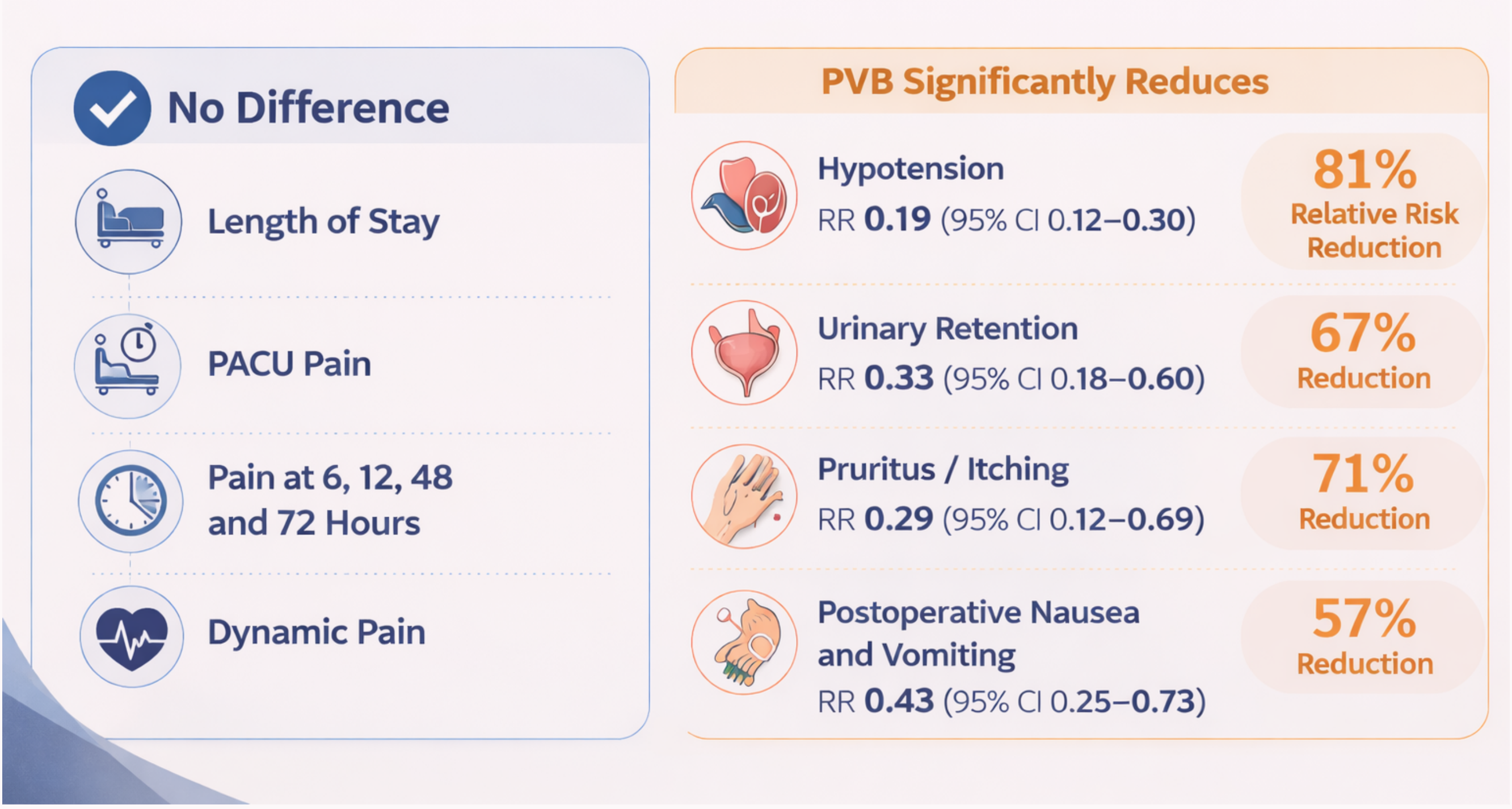
BACKGROUND

- Thoracic Epidural Anesthesia is traditionally considered the gold standard for thoracic surgery analgesia
- Paravertebral block is a well-established alternativa regional technique
- Used in;
 - Thoracotomy
 - Video Assisted Thoracoscopic Surgery - VATS
 - Robotic Assisted Thoracoscopic Surgery - RATS
- Comparative efficacy and safety remain debated

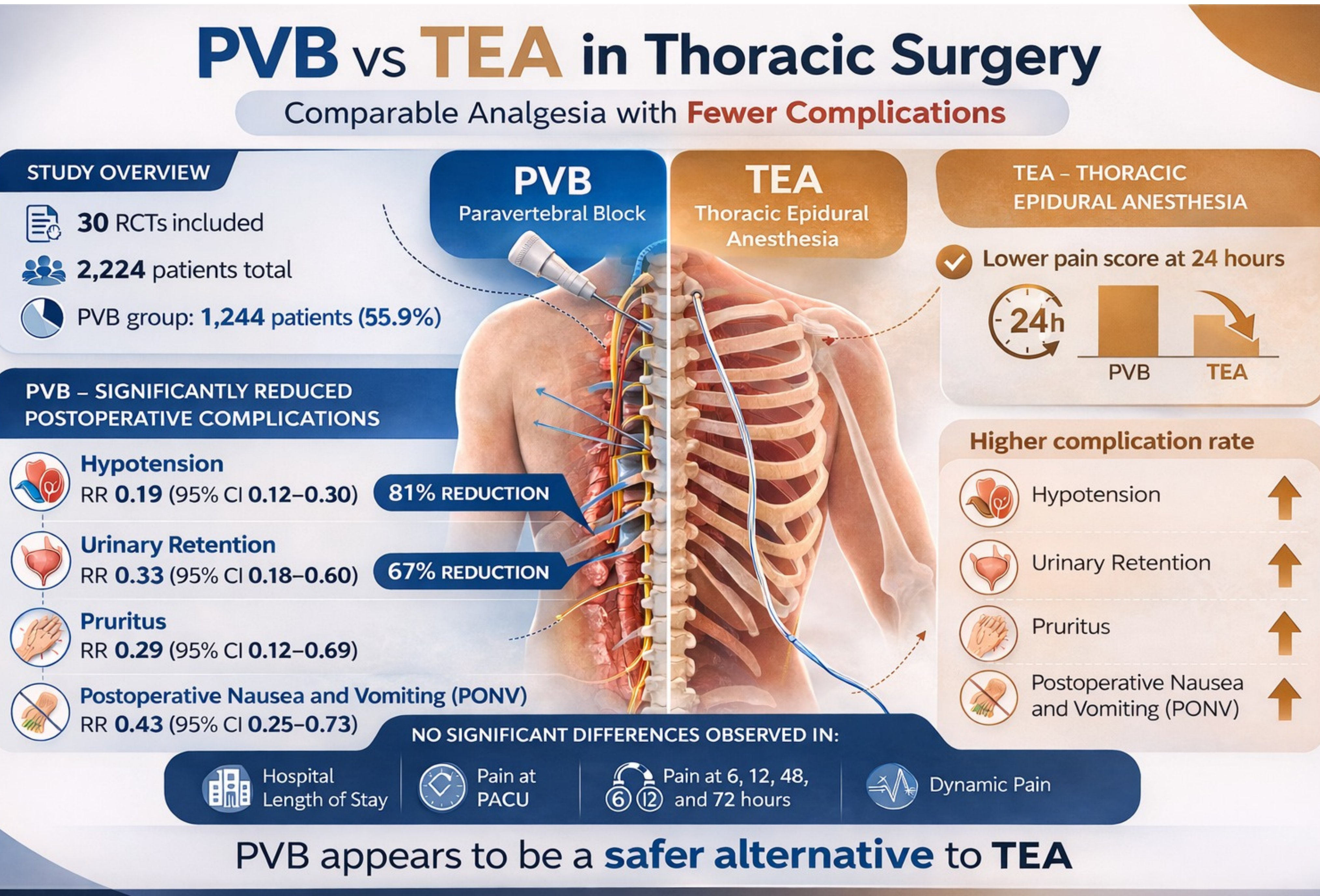
METHODS

- Systematic review and meta-analysis of randomized controlled trials
- Databases: Pubmed, Embase and Cochrane Library
- **Population:** Adults (>18yo) undergoing thoracic surgery: Thoracotomy, VATS, RATS
- **Comparison:** Thoracic paravertebral block (PVB) vs Thoracic epidural anesthesia (TEA)
- **Outcomes:** Pain scores, complications, length of stay
- Risk of bias: Cochrane RoB 2 tool

RESULTS



Epidural anesthesia vs Paravertebral block for thoracic surgery in adults: A systematic review and meta-analysis



CLINICAL TAKE-HOME MESSAGE

- PVB provides analgesia comparable to TEA
- Significantly fewer complications
- Simple and reproducible alternative technique

DISCUSSION

- PVB showed fewer postoperative complications than TEA
- Although TEA showed statistically lower pain scores at 24 hours, the difference **did not exceed the minimal clinically important difference (MCID)**
- **No differences** were observed in pain at other time points, dynamic pain, or hospital length of stay.
- Analgesia was comparable between techniques
- These findings suggest that PVB may represent a safer alternative to TEA for thoracic surgery while maintaining **comparable analgesic** efficacy

Scan for more information



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