

The Use of Venlafaxine in Reducing Pain in Primary Total Knee Replacement

— **Mihir Joshi**; Harrison Manacsas; Sarah Zhang PhD, CRNA; Paul Su, MD

BACKGROUND

Patients undergoing total knee arthroplasty (TKA) can have challenging post-operative pain. Multimodal pain medication regimens provide optimal pain management with opioid stewardship. Venlafaxine, an SNRI medication, can treat neuropathic pain requires investigation for TKA

METHODS

1. Enrollment of 100 patients undergoing TKA
2. Randomized to 37.5 mg Venlafaxine or placebo for 7 days, in addition to provider's prescribed pain regimen
3. EHR capture of intra-procedure and post-operative inpatient pain medication administration + patient reported opioid medication use and brief pain inventory at 24 hours, 7 days & 3 months post-op

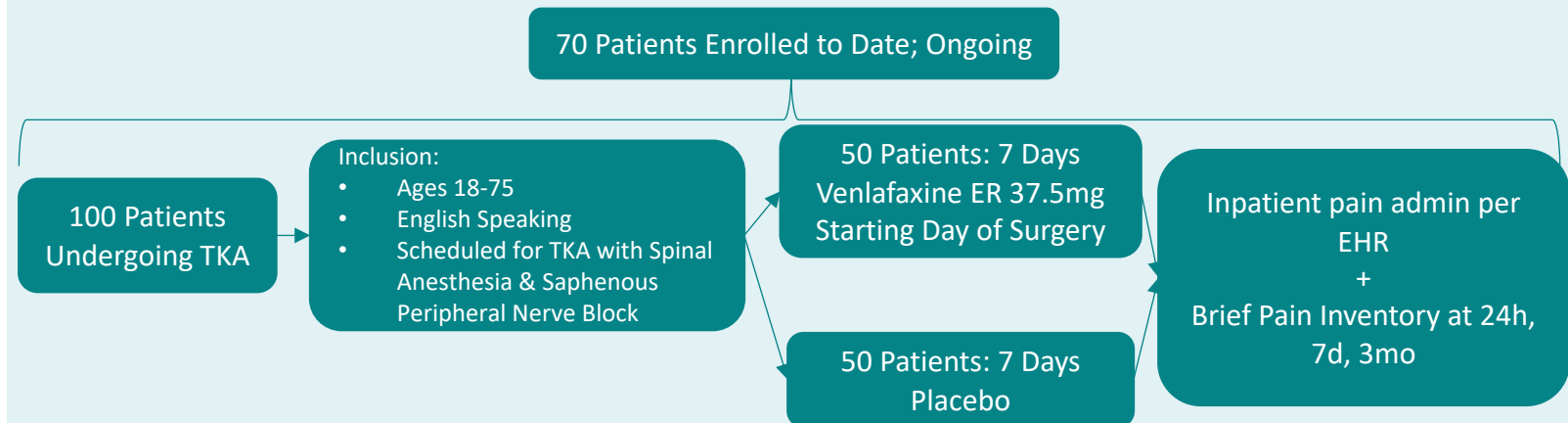
RESULTS

- Ongoing enrollment, currently at 70 patients
- Trial data blinded and incomplete, therefore no preliminary results to report

DISCUSSION

Enrollment process has been enlightening on patient motivators for such research (negative experiences/associations with opioid medications; desire to contribute to future patient care). Patient factors for apprehension include negative associations with anti-depressants and concern with increasing polypharmacy.

Patients undergoing total knee replacement are willing to trial venlafaxine due to opioids medication apprehension, but may have negative associations with anti-depressants and polypharmacy concern*



*These findings are the qualitative report of the primary author, the study's majority enroller. Quantitative RCT study data is not available with enrollment ongoing



University of California
San Francisco