

# Pain assessment

**Pain assessment** is crucial if pain **management** is to be effective.

Pain is multidimensional therefore assessment must include the intensity, location, duration and description, the impact on activity and the factors that may influence the child's perception of pain (bio psychosocial phenomenon) The influences that may alter pain perception and coping strategies include social history/issues, cultural and religious beliefs, past pain experiences and the first pain experience.

**Perioperative** pain **assessment** and **management** in neurosurgical **patients** varies widely across the globe. There is lack of data from developing world regarding practices of pain assessment and management in neurosurgical population.

A **survey** aimed to capture practices and perceptions regarding perioperative pain assessment and management in neurosurgical patients among **anesthesiologists** who are members of the Indian Society of Neuroanaesthesiology and Critical Care (ISNACC) and evaluated if **hospital** and **pain** characteristics predicted the use of structured pain assessment protocol and use of **opioids** for postoperative pain management.

A 26-item English language **questionnaire** was administered to members of ISNACC using Kwiksveys platform after ethics committee approval. This outcome measures were adoption of structured protocol for pain assessment and opioid usage for postoperative pain management.

The response rate for this survey was 55.15% (289/524). One hundred eighteen (41%) responders informed that their hospital setup had a structured pain protocol while 43 (15%) responders reported using opioids for postoperative pain management. Predictors of the use of structured pain protocol were private setup (odds ratio [OR] 2.64; 95% confidence interval [CI] 1.52-4.59;  $p=0.001$ ), higher pain intensity (OR 0.37; 95% CI 0.21-0.64;  $p<0.001$ ) and use of pain scale (OR 7.94; 95% CI 3.99-15.81;  $p<0.001$ ) while availability of structured pain protocol (OR 2.04; 95% CI 1.02-4.05;  $p=0.043$ ) was the only significant variable for postoperative opioid use.

Less than half of the Indian neuroanesthesiologists who are members of ISNACC use structured protocol for pain assessment and very few use **opioids** for **postoperative pain** management in neurosurgical patients <sup>1)</sup>.

<sup>1)</sup>

Sriganesh K, Bidkar PU, Krishnakumar M, Singh GP, Hrishi AP, Jangra K. Perioperative Analgesia In Neurosurgery (PAIN): A national survey of pain assessment and management among neuroanesthesiologists of India. Int J Clin Pract. 2020 Sep 23:e13718. doi: 10.1111/ijcp.13718. Epub ahead of print. PMID: 32966673.

From:  
<https://neurosurgerywiki.com/wiki/> - **Neurosurgery Wiki**

Permanent link:  
[https://neurosurgerywiki.com/wiki/doku.php?id=pain\\_assessment](https://neurosurgerywiki.com/wiki/doku.php?id=pain_assessment)

Last update: **2024/06/07 02:51**



