
LETTER TO THE EDITOR

POSTOPERATIVE PAIN MANAGEMENT PRACTICE AT TEACHING HOSPITALS IN JORDAN

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Health care providers are participants of pain managements. Efforts to identify barriers to effective pain management and attempts to modify those barriers are essentials^{1,2,3}. We usually do patient pain management survey, but in this survey we did the opposite, to set down the basis and grounds of pain management guidelines for our patients.

The aim of our survey was to assess the status of acute postoperative pain management in Jordan, to evaluate the current postoperative pain management practices, identify areas requiring improvement in pain management, to help caregivers optimize pain management with uphold high care standards and identify deficits. 84% were responders to our five questions questionnaire of pain management in Jordan including: governmental, military services, university and private sector teaching hospitals.

The results of 5 survey questions were as follow:

The first question: which of the following employees is responsible to prescribe the postoperative pain management drugs at your institute?

We found that 45.5% Jordanian Anesthetists were responsible for prescription then Surgeons 40.9% and both 13.6%.

The second question: for which of the following employees dose your institute provide regular on site postoperative pain management training?

Anesthetists 54.4% were providers then surgeons 9.1%, both 22.7% and others such as ward nurses, recovery room nurses were 13.6%.

The third question: Are your patients informed preoperatively about postoperative pain management in your institute?

Yes systematically in 32%, Yes if specific /difficult cases 40.9%. Yes on patient demand 13.6%, and No 13.6%.

The fourth question: Are there specific written postoperative pain management protocols in place for treating postoperative pain in ward?

Yes for all patients 22.7%, Yes for following cases (Patient controlled analgesia, Regional or Central block) 40.9%, and NO 27.3%.

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Conflict of interest: none.

Funding: none.

The fifth question: If specific protocols exist for treating postoperative pain in ward, are they applied in daily practice?

Always 22.7%, Often 18.2%, Rarely 45.5%, and Never 13.6%.

This survey has increased our awareness of postoperative pain management and experience for improving the existing practice, also the intense need for written protocols and structured programs. There is still room for improvement with minimum acceptable requirements and much work and continuing vigilance will be required to make transition.

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^{*} Train-of-four
[†] Post tetanic counts
[‡] Second twitch

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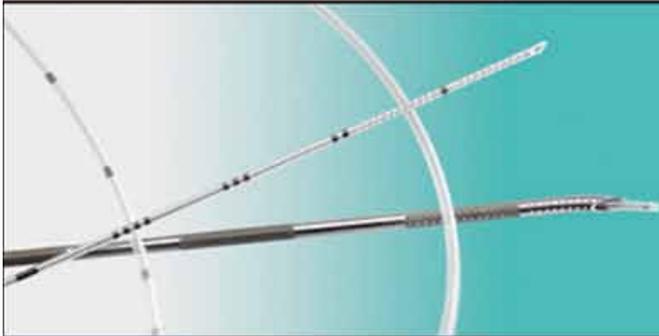
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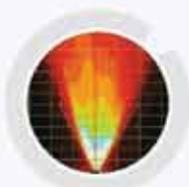
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References:

1. Talon M. et al., J Burn Care Research 2009; 30: 599-605.
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