

Patient Satisfaction After Hand Trauma Surgery Performed Under Regional Anaesthesia

D. Buckley¹, S. Ahmed¹, S. Khan¹, H. Krishnamurthy¹

¹Department of Anaesthesia, Royal Victoria Infirmary, Newcastle upon Tyne, UK

Background

It is established that use of regional anaesthesia as the sole anaesthetic method results in faster recovery and superior pain relief¹, whilst having fewer side effects and high patient satisfaction². This study follows on from a previous audit analysing data following hand surgery performed under regional anaesthesia.

Methods

Pain scores, satisfaction rates and complications were reviewed from patients who received a block for hand trauma surgery since 2012.

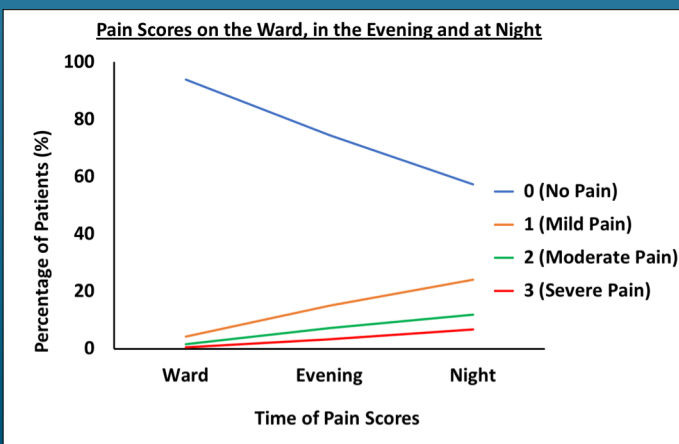
Results

Of the 1838 patients who had complete data, mean age was 42, 68% were male and 95% ASA 1-2.

The majority were day case procedures (92%) lasting < 2 hours (99%). Axillary blocks were most common (78%), followed by infraclavicular blocks (16%). Forearm top-up blocks occurred in 9%. The intra-operatively quality of the block was "perfect" in 94% of cases.

Whilst motor weakness was rated as "a little annoying" by 21% of patients, the majority (72%) did not find it an issue. No pain was experienced by 94% of patients on the postoperative ward, dropping to 74% and 57% in the evening and night of surgery, respectively (see graph 1).

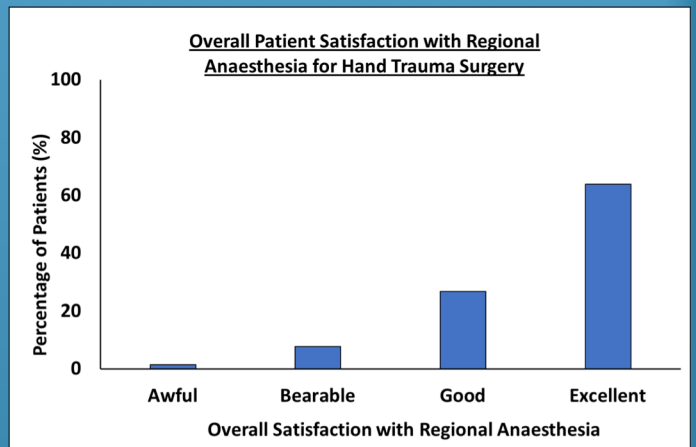
Graph 1: Pain Scores



Most were performed without sedation (86%) and few patients felt pain or paraesthesia during the block (1% and 5%, respectively), with 77% describing the experience as "not unpleasant".

Overall, 91% of patients reported satisfaction rates of good or excellent, with 92% saying they would have regional anaesthesia again.

Graph 2: Overall Patient Satisfaction



The complication rate was very low and, in most cases, found to be due to the primary injury or surgery rather than the regional block.

Conclusions

Use of regional anaesthesia for hand trauma patients produces excellent results in the majority of patients.

This, along with the low complication rates, suggests that routine follow-up is unlikely to be needed in the future.

Acknowledgements

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References

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