

Effect of implanting fibrin sealant with ropivacaine on pain after laparoscopic cholecystectomy.

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Abstract:

AIM: To investigate the safety and efficacy of implanting fibrin sealant with sustained-release ropivacaine in the gallbladder bed for pain after laparoscopic cholecystectomy (LC). **METHODS:** Sixty patients (American Society of Anesthesiologists physical status was I or II and underwent LC) were randomly divided into three equal groups: group A (implantation of fibrin sealant in the gallbladder bed), group B (implantation of fibrin sealant carrying ropivacaine in the gallbladder bed), and group C (normal saline in the gallbladder bed). Postoperative pain was evaluated, and pain relief was assessed by visual analog scale (VAS) scoring. **RESULTS:** The findings showed that 81.7% of patients had visceral pain, 50% experienced parietal, and 26.7% reported shoulder pain after LC. Visceral pain was significantly less in group B patients than in the other groups ($P < 0.05$), and only one patient in this group experienced shoulder pain. The mean VAS score in group B patients was lower than that in the other groups. **CONCLUSION:** Visceral pain is prominent after LC and can be effectively controlled by implanting fibrin sealant combined with ropivacaine in the gallbladder bed. © 2009 The WJG Press and Baishideng. All rights reserved.