

Mezinárodní kongres sester pracujících v oboru ARIM

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Application of spinal and general anesthesia for inguinal hernia repair compared patient satisfaction at the Clinical Centre in Stip

Prof. Dr. G. Panova, N. Panov, B. Panova, N. Velickova, L. Nikolova, D. Jovancevska

Abstract

UGD-FMN-Stip

Introduction: inguinal hernia is the most common surgical procedure. The choice of anesthetic techniques ranging from local infiltration through regional or subarachnoidal block and general endotracheal. This selection can be performed based on the complexity of the procedure and its length, the preferences of the surgeon and anesthesiologist, the patient's wishes, coexisting morbidity or any combination of these. In this article we made a comparison and use of two anesthetic techniques for inguinal hernia repair: general anesthesia and spinal anesthesia. The aim of this article was to compare the pleasures of anestetic techniques between two groups pacienti. Materijali methods: labor involved in isituvanjeto 50 patients. They were divided into two groups depending on what type of anestheic you have received general or spinal anestetic. Self administered questionnaire was developed and tested ,independent and understandable. From each patient preoperatively was asked to complete tested. Results: patient satisfaction is high with both techniques. They were generally satisfied with the explanation of the anesthetic technique and the results of all possible complications and uncertainties. The group that received general anesthetic, patients are more likely to have nausea, vomiting, and are less satisfied with postoperative pain control compared with the group who received spinal anesthesia, in which there is only fear of the application of anesthetic. In both groups of patients reported that if they need to re to choose anesthetic technique will reelect the same type anesthetic. Conclusion: There was no difference in patient satisfaction with anestetic experiences between spinal and general anesthetic. This is good evidence that both techniques are implemented in our institution are equivalent from the point of view of the patient.

Key words: inguinal hernia, general anesthesia, spinal anesthesia.

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