

PE-53. MORPHINE 0.25 MG, BUPIVACAINE 2.5 MG AND CLONIDINE 45 MICROG INTRATHECALLY IN LABOR ANALGESIA.

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Objective: To know the efficacy of morphine 0.25 mg, bupivacaine 2.5 mg and clonidine 45 microg in providing labor analgesia.

Patients and methode: 62 term parturients, 15-29 years old, physical status ASA I, without any spinal anesthesia contraindication, who would have a normal and active labor process, were included in this study. After informed consent, morphine 0.25 mg, bupivacaine 2.5 mg and clonidine 45 microg were injected intrathecally through 27 G pencil point spinal needle at L3-4 or L4-5 interspace, when the cervix opening was 3-4 cm. Metoclopramide 10 mg intravenously had been given before the procedure was taken. After the baby had born, nal-trexone 25 mg p.o was given to the mother.

We evaluated pain that was experienced by all of the patients before the analgesia procedure, and during labor process using VAS 0 (no pain at all)- 100 (maximal pain). We also recorded side effect that occurred until 24 hours after the analgesia procedure (nausea and vomiting, pruritus, shivering, respiratory depression), APGAR score and patient satisfaction for the labor analgesia technique.

Result: In all of the patients, pain was relieved soon after the injection and the analgesia effect last until the next 12 hours. There was no addition of analgesia required except in 2 cases which intrathecal injection was repeated because of the prolonged labor process (more than 12 hours). Nausea and vomiting was found in 21 cases (34 %), pruritus in 5 cases (8%) and shivering in 4 (6%) cases. There was no respiratory depression found. APGAR scores were good in all cases. 50 (81%) cases satisfied with this technique, 49 (75%) cases choosed to have this technique again in the future.

Conclusion: Combination of morphine 0.25 mg, bupivacaine 2.5 mg and clonidine 45 microg intrathecally could provide a good labor analgesia, with rapid onset last 12 hours later with minimal side effect.

Keywords: Morphine, bupivacaine, clonidine, intrathecal, labor analgesia.

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