# Comparing Multimodal vs. Traditional (Unimodal) Analgesia

Multimodal analgesia reduces total required opioid drug dose

#### After hip surgery

Receiving 1 additional analgesic mode Receiving 2 additional analgesic mode Receiving more than 2 additional analgesic modes

-6.8% opioid use

-12.4% opioid use

**-18.4%** opioid use

#### After knee surgery

Receiving 1 additional analgesic mode Receiving 2 additional analgesic mode Receiving more than 2 additional analgesic modes

-6.4% opioid use

-12.4% opioid use

-15.0% opioid use

# Multimodal analgesia reduces opioid-related side effects

#### Multimodal analgesia after hip surgery

-12.1% length of hospitalization stay

–26% gastrointestinal complications –19% respiratory complications

Memtsoudis SG, et al. Association of Multimodal Pain Management Strategies with Perioperative Outcomes and Resource Utilization: A Population-based Study. Anesthesiology. 2018 May;128(5):891-902

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#### AM I AT HIGH RISK FOR PERIOPERATIVE PAIN?

- Chronic alcohol use
  - Alcohol type\_\_\_\_\_, \_\_\_ml/day
- Sleeping pills/Psychiatric drug use
  - O Drug name\_\_\_\_\_, \_\_\_\_ pills/day
  - O Drug name\_\_\_\_\_, \_\_\_\_ pills/day
- O Pain killers/Analgesic drug use
  - O Drug name\_\_\_\_\_, \_\_\_\_ pills/day
  - O Drug name\_\_\_\_\_\_,\_\_\_pills/day
- History of chronic pain
  - O Yes, Symptoms \_\_\_\_\_
  - O No

#### Seek advice from an Anesthesiologist!

#### Reporting Perioperative Pain

- If you have experienced postoperative pain, please contact your doctor or the anesthesia team.
- Subsequent hospital resources and counselling are available if necessary



# What You Should Know About Multimodal Analgesia





Taiwan Society of Anesthesiologists Shared Decision Making Series

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Quality anesthesia and pain control should take into account individual differences, such as age, gender, physiological condition, and surgical site.

65% of patients receiving surgery experience moderate to severe pain



Perioperative pain can be adequately controlled!

#### **Nociceptive Pain**

Skin, Subdermis, Inflammation, Muscle, Fascia, Periosteal Ligament, Joint Damage

#### **Neuropathic Pain**

HIVD, Spinal stenosis, Peripheral Neuropathy

Psychogenic Pain

**Psychologically Induced Pain** 



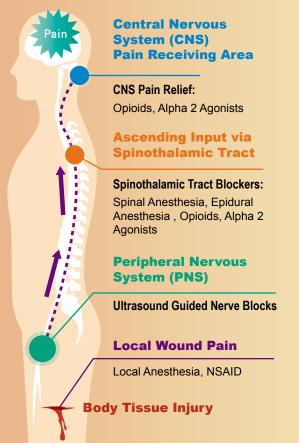
# Why do we need multimodal analgesia for perioperative pain control?

Most perioperative pain are due to multifactorial causes.

No single analgesic agent is enough to manage every perioperative pain-related symptom.

Multimodal analgesia provides better pain relief, reducing the total dose and side effects of a single opioid agent.

## Pain pathways covered by multimodal analgesia



	Multimodal analgesia	Traditional (Unimodal) analgesia
Pain management regimen	Administration of two or more analgesic agents or techniques	Single analgesic (Opioid based)
Postoperative analgesic dose	Lower required dose	Risk of insufficien dose or overdose
Postoperative pain relief	Lower pain score	Higher pain score
Postoperative nausea	Lower incidence	Higher incidence
Postoperative ileus	Lower incidence win	Higher incidence
Length of hospital stay	Shorter hospital stay	Longer hospital stay

#### **Specialist's Recommendations**

American Society of Anesthesiologists®

ASA strongly agrees that anesthesiologists should use multimodal pain management therapy



Multimodal analgesia reduces opioid doses and reduces opioid-related side effects



These problems are preventable!



Taiwan Society of Anesthesiologists