

PP-16 Postoperative Pain Management For Hypospadias: Still A Dilemma

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Background: Penile surgery for hypospadias is one of our pediatric surgery department's most commonly performed urological surgeries. At our place, there is no consensus regarding pain management for this group of patients. Most surgeons prefer a dorsal penile block or no regional block. Very few would be comfortable with the caudal block. **Aim-** This retrospective cohort study assessed the postoperative pain management practices for hypospadias surgery in a tertiary care center in Western Rajasthan, India. **Method:** We reviewed the perioperative records of 102 children with hypospadias undergoing surgery from January 2020 to June 2023. We gathered data regarding the method of pain management for the immediate postoperative period. Any complications noticed till 3 months were noted. **Results:** The median age of the children was 7 (5, 9) years. All the children received general anesthesia. For postoperative pain, 20 (19.6%) children received caudal block, 38 (37.3%) Dorsal penile block, and 44 (43.1%) were managed by IV analgesics. A significant difference was found in 3 groups, with the IV analgesic group requiring significantly higher opioid boluses ($p < 0.05$). The difference in PACU discharge time among the three groups was statistically significant ($p < 0.05$), with IV analgesics groups having the highest (44mins), the Caudal group at 20mins, and the dorsal penile block group at 38 mins. There was no significant difference in the early complications like edema, bleeding, urinary retention, and other complications like meatal stenosis, urethra-cutaneous fistula, or wound dehiscence. **Conclusion:** Pain management methods impact opioid requirement, and PACU stay. The patients managed with IV analgesics tend to have higher requirements of opioid boluses in PACU, causing delayed discharge from PACU compared to caudal and dorsal penile block patients. There was no difference in immediate and intermediate complications in all three group patients.

Keywords: Hypospadias, postoperative pain