



ERAS Society® Pediatrics Virtual Meeting

June 17, 2022

Multimodal Analgesia Panel

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Robert Moore, SUNY Stony Brook

Elizabeth Yerkes, Lurie Children's Hospital

Andrew Strine, Cincinnati Children's Hospital

The diagram consists of three overlapping circles arranged horizontally. The leftmost circle is blue and contains the text 'Early mobilization'. The middle circle is orange and contains the text 'Analgesia at rest AND on movement' followed by a downward arrow and 'requirement for opioids'. The rightmost circle is blue and contains the text 'Early return of gut function'. The circles overlap in the center, creating a shared area.

Early
mobilization

**Analgesia at
rest AND on
movement
↓ requirement
for opioids**

Early return
of gut
function

Multimodal Analgesia

**Obligatory
use of non-
opioid
analgesics**

**Regional
analgesia
whenever
possible**

**Consider
using co-
analgesics**

**Opioids given
immediately
based on
patient need**

PARACETAMOL

LOCAL
ANESTHETICS

OTHER
AGENTS

NSAIDS

Central neuraxial

Regional (nerve/plane blocks)

Systemic (IV lidocaine)

Clonidine/Dexmedetomidine

Ketamine

Dexamethasone

Gabapentin

Minimize
use of
opioids

"The whole is greater than the sum of the parts"

Aristotle

OPEN

REVIEW ARTICLE

Pain management after complex spine surgery

A systematic review and procedure-specific postoperative pain management recommendations

Piet Waelkens, Emissia Alsabbagh, Axel Sauter, Girish P. Joshi and Hélène Beloeil, on behalf of the PROSPECT Working group** of the European Society of Regional Anaesthesia and Pain therapy (ESRA)

- Paracetamol
- COX-2 specific-inhibitors/ NSAIDs
- IV low-dose ketamine infusion
- Regional analgesia techniques including epidural analgesia using LA (+/- opioids)

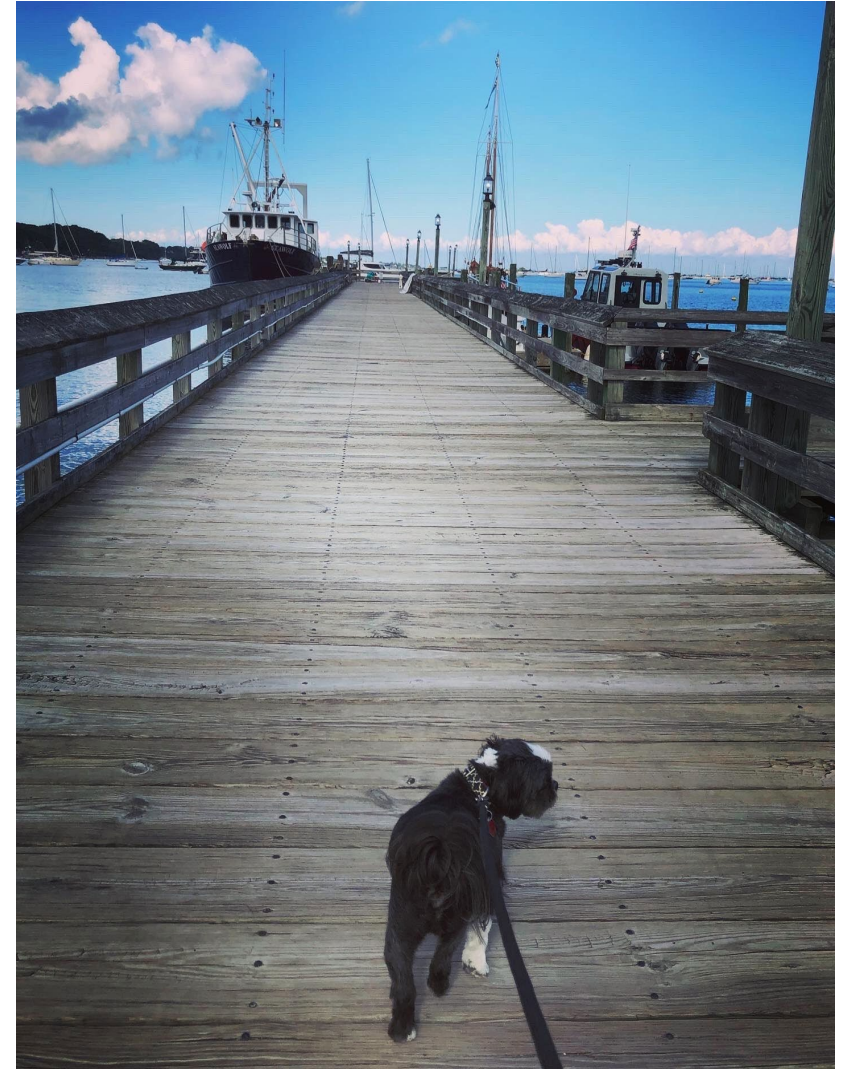


- LA wound infiltration
- Intrathecal/ epidural opioids
- ESP block
- Thoracolumbar interfascial plane block
- Intravenous lidocaine
- Dexmedetomidine
- Gabapentin

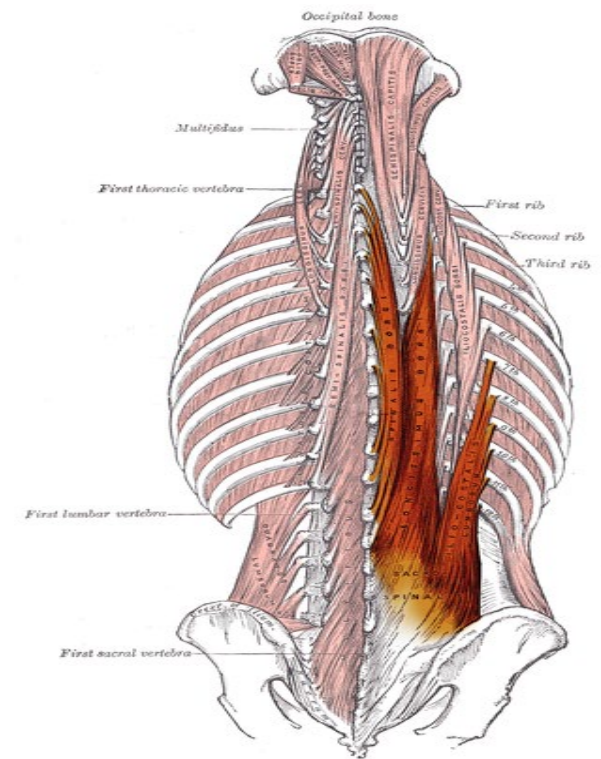
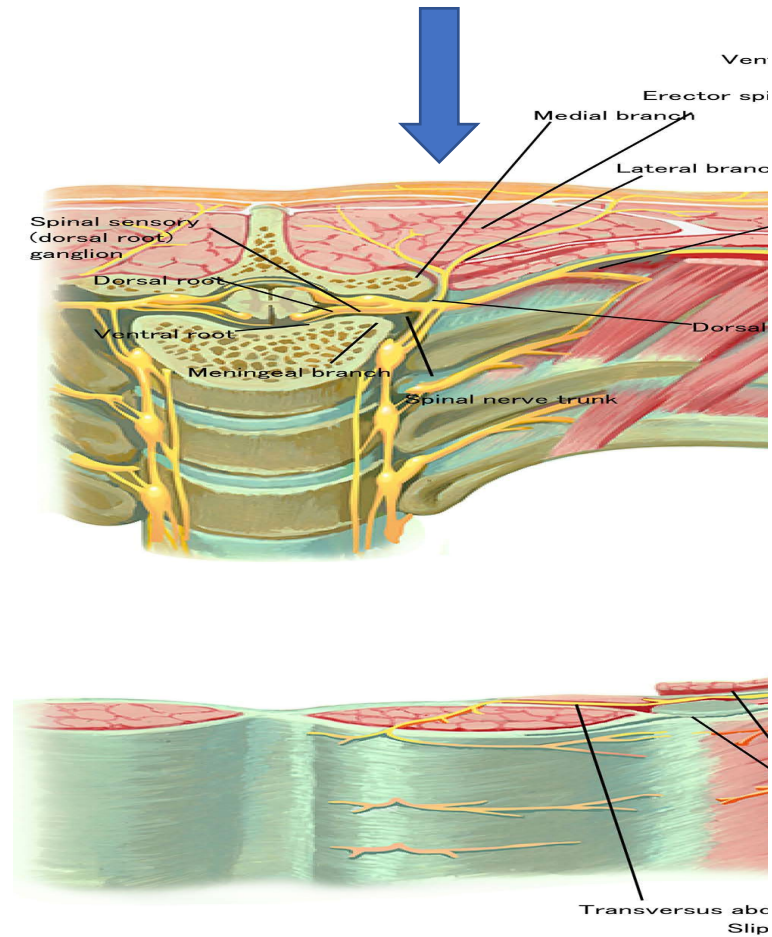


Robert Moore, MD

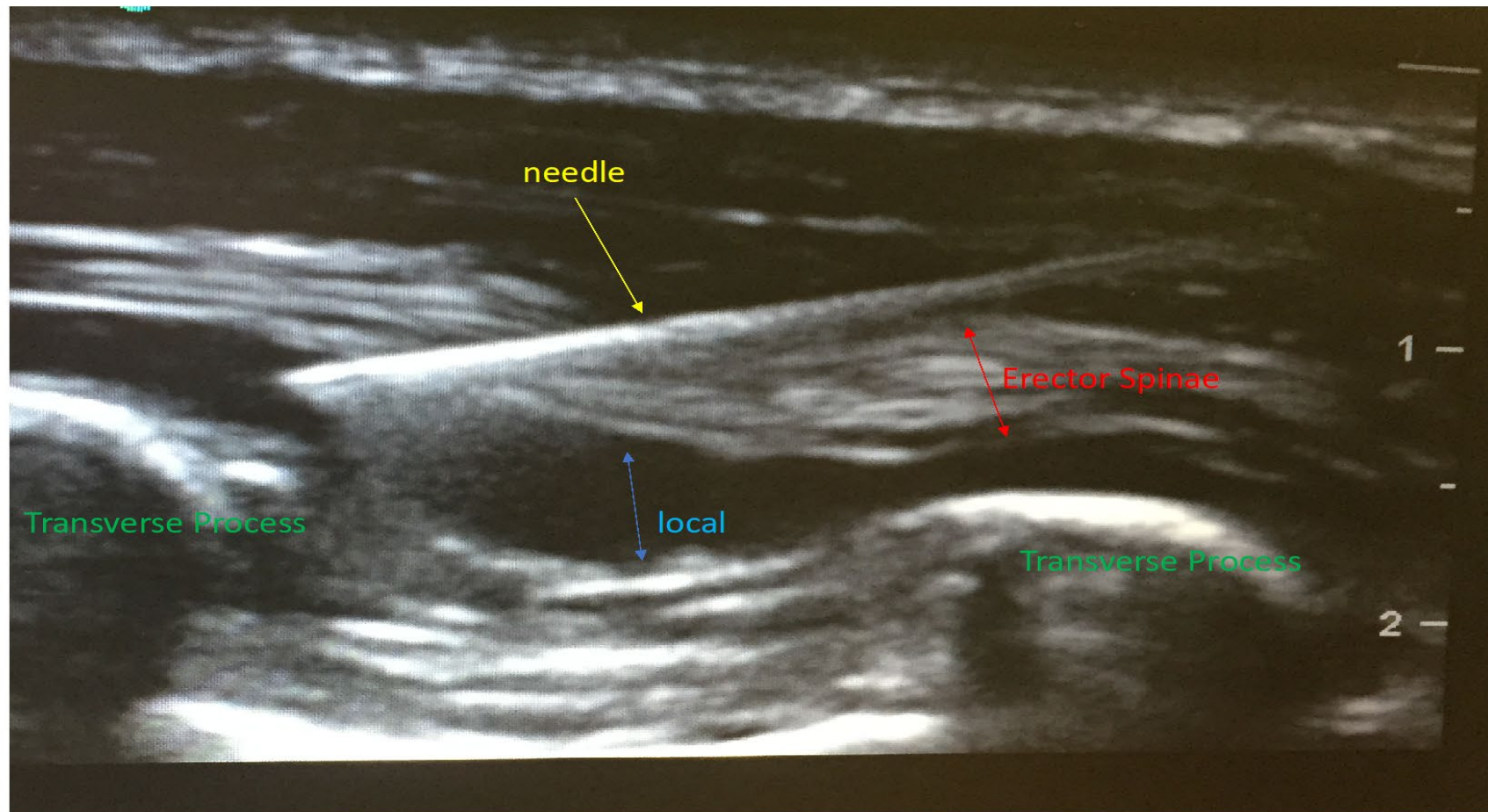
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Erector Spinae Plane Block

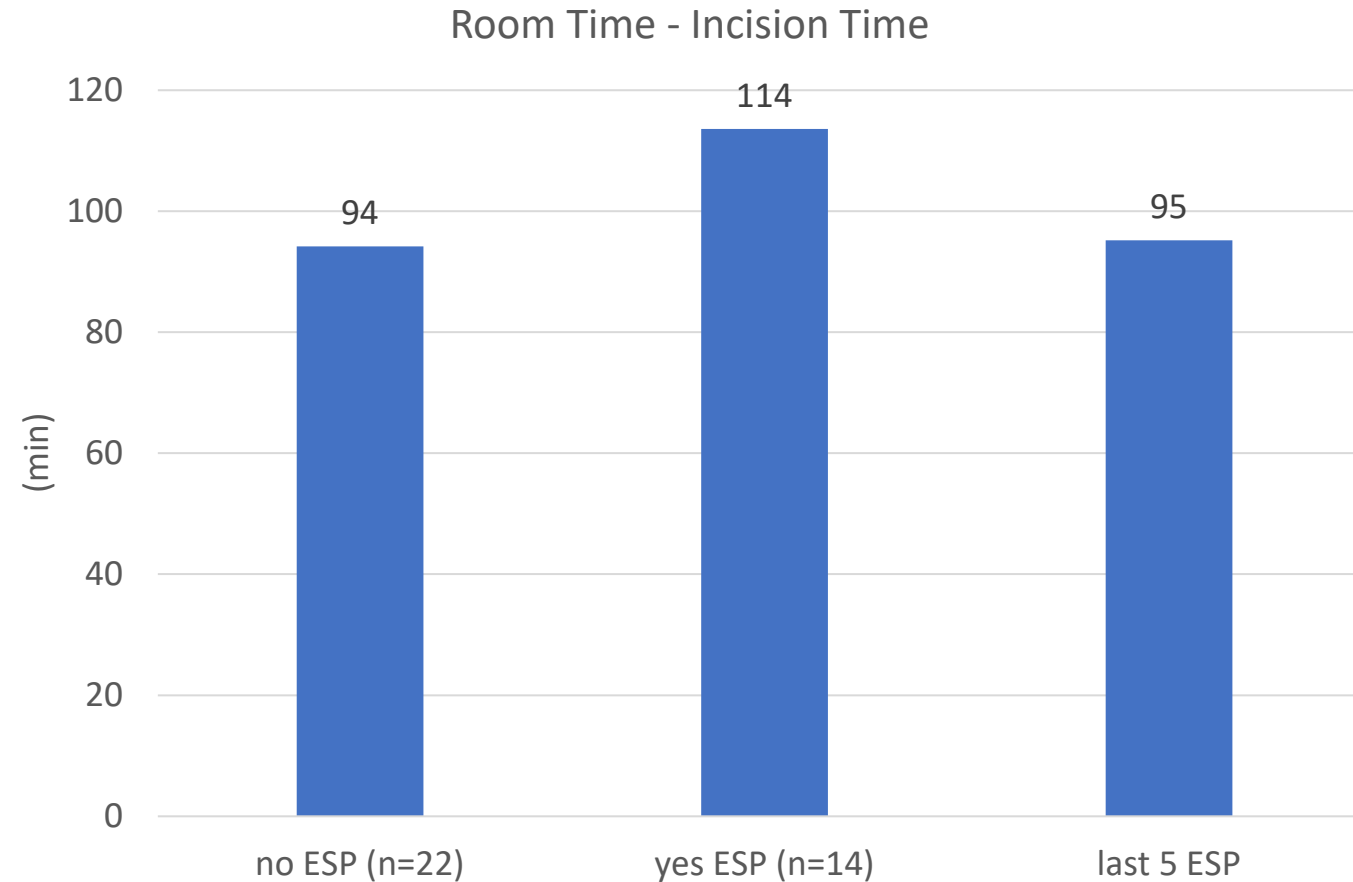


Open Journal of Anesthesiology, 2018, 8, 214-222

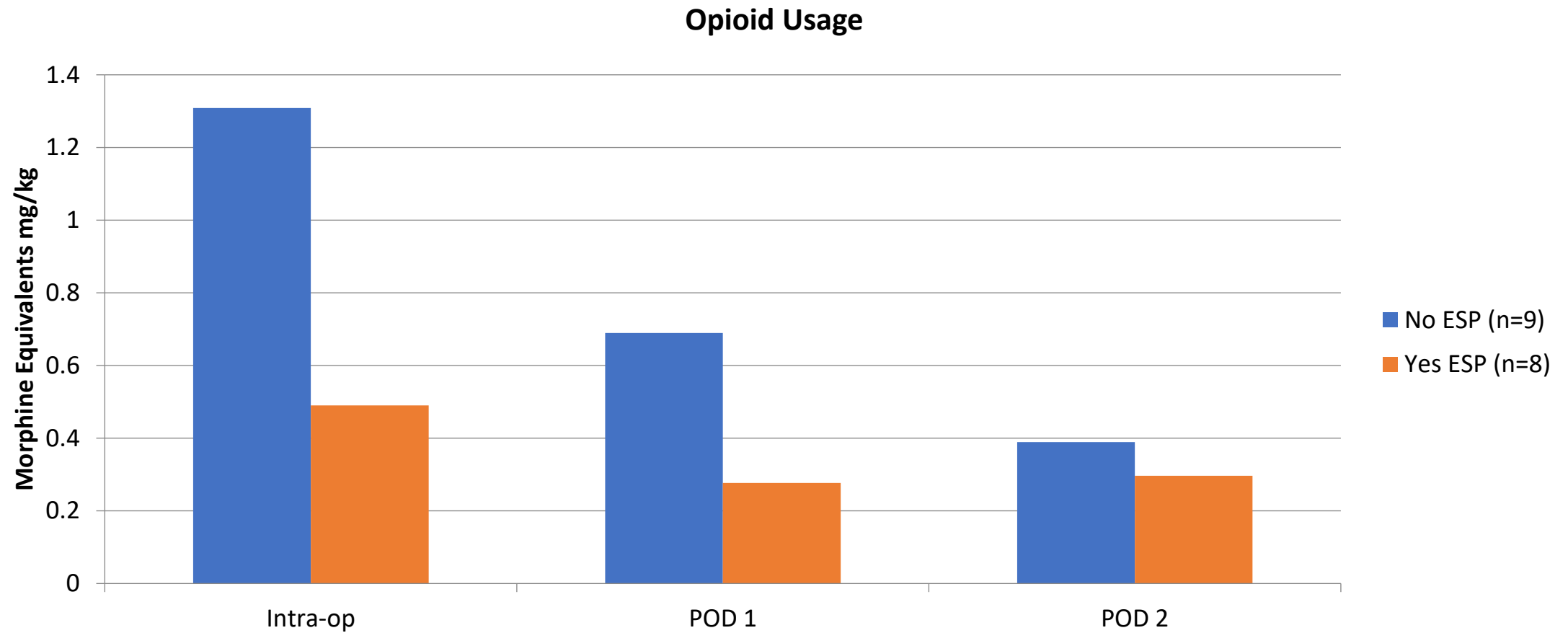


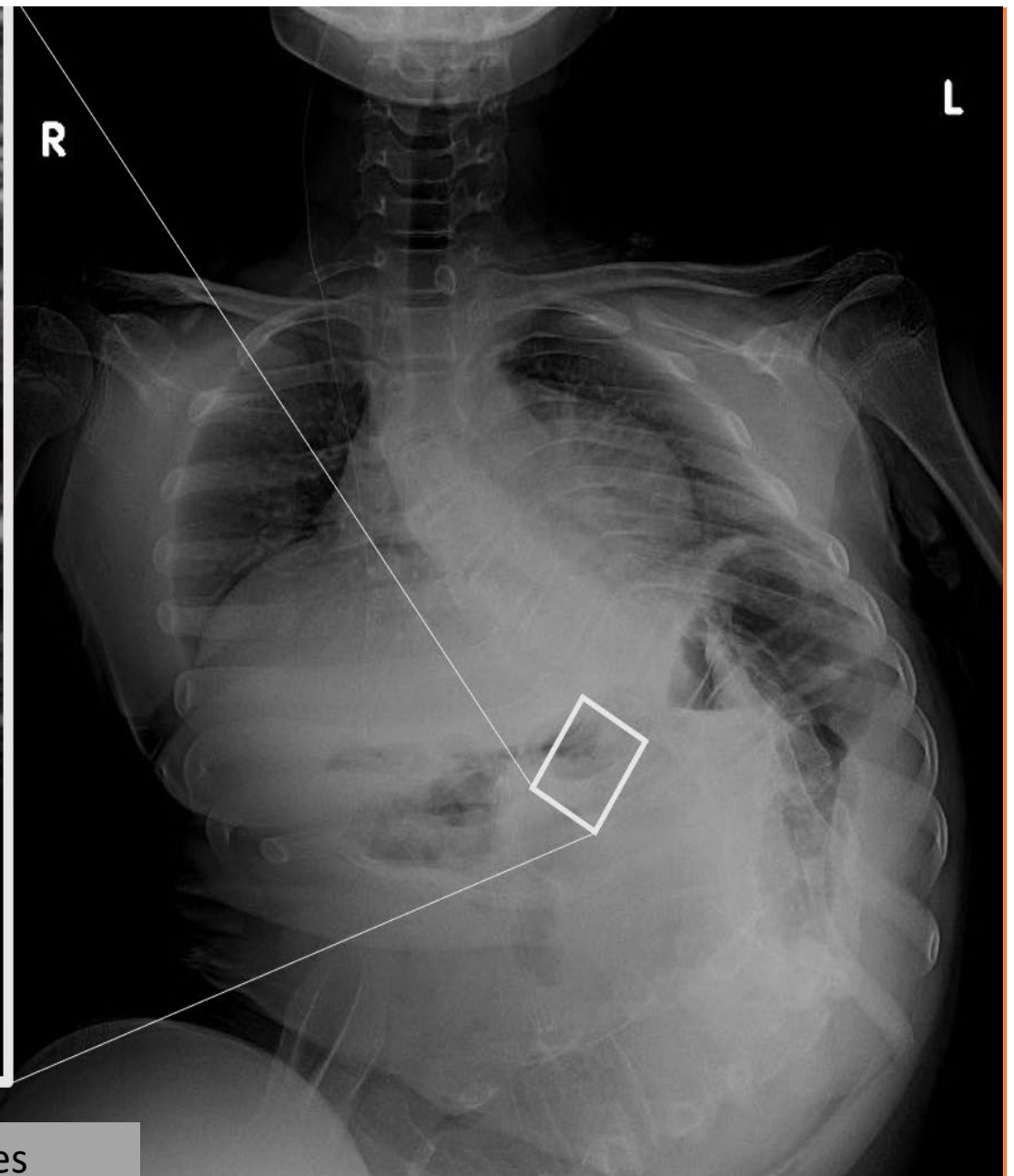
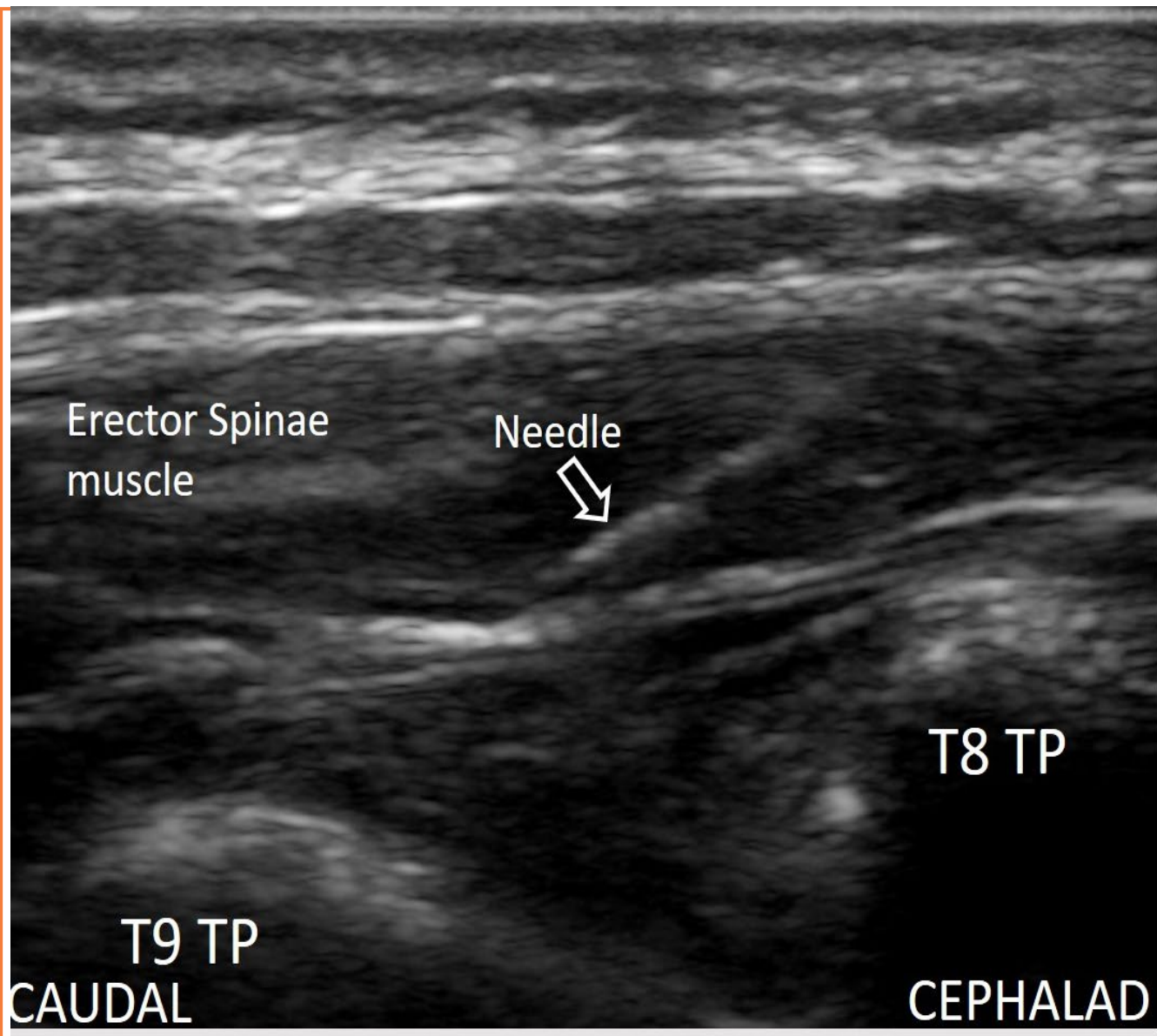
Erector Spinae Plane (ESP) Block

Total OR Anesthesia Time



LIVER TRANSPLANT RECIPIENT





2015 Mitrofanoff c/b poor pain control, ileus, and feeding difficulties
B ESP CATH at T9-T10 – 8 ml /hr of 0.1% ropivacaine led to opioid-free post-op course

Questions and Discussion

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