

# Overview of Analgesia in ITU

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# Why?

- There are several reasons analgesia (Pain Relief) is needed in ITU
  - To help patients tolerate on going intubation and ventilation to help minimise the amount of sedation needed.
  - To reduce the pain of procedures performed whilst on ITU
  - To treat pain caused by the problem that has caused their ITU admission eg Trauma or Surgery

# Why is analgesia important?

- It helps to reduce distress and make the ITU stay more tolerable
- It helps to allow better compliance with treatment eg Be more tolerant of being ventilated
- It helps with the ability to do more activities that speed recovery eg get out of bed, mobilise

# How? Sedated and Ventilated

- Patients who are sedated will have an IV (intravenous) infusion of an opiate
  - This will be morphine or fentanyl or Alfentanil
  - All act in the same way but some last longer than others
  - The rate can be changed and additional amounts (bolus) given if needed

# How? Not Sedated

- This will vary depending on why it is needed.
  - Patients who have been on ITU along time may be on an infusion, but the plan is usually to stop this.
  - Patients who are post surgery or are trauma patients may well have several types of pain relief. This is to try to reduce the side effects from treatment.
    - Treatments may include
      - Epidurals and Wound Infusion catheters
      - Opiates- PCA, Sub Cut , Oral opiates
      - Paracetamol
      - Anti inflammatory Drugs

# What are the problems

- Too much pain relief leads to side effects.
  - Many Pain medicines cause sedation and also respiratory depression. These can slow ventilation weaning and mobilisation.
- Too little pain relief
  - Patients become tense and as a results muscles guard against pain. This can reduce ability to deep breath, cough and mobilise all of which speed recovery.

IT'S ALWAYS A BALANCE BETWEEN THE TWO