

# Anesthesia regimen linked to post-orthognathic op pain

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Patients undergoing orthognathic maxillofacial surgery experience more pain postoperatively if they receive anesthesia with propofol and remifentanil versus inhalational agents and longer-acting opioids, according to a study published in the Summer 2012 issue of *Anesthesia Progress*.

(HealthDay) -- Patients undergoing orthognathic maxillofacial surgery experience more pain postoperatively if they receive anesthesia with propofol and remifentanil versus inhalational agents and longer-acting opioids, according to a study published in the Summer 2012 issue of *Anesthesia Progress*.

Soudeh Chegini, from the Wexham Park Hospital in Slough, U.K., and colleagues retrospectively compared the recovery characteristics of 51 patients who had undergone orthognathic maxillofacial surgery. Twenty-one had received anesthesia with intravenous propofol and remifentanil and 30 had received anesthesia with volatile inhalational agents and longer-acting opioids.

The researchers found that patients who had received propofol and remifentanyl reported significantly higher [pain scores](#) in the first four hours after surgery. The median [recovery time](#) for this group was shorter (65 versus 93 minutes), though this did not reach [statistical significance](#). Both groups had similar early postoperative opioid usage, hemodynamic parameters, and postoperative nausea and vomiting.

"We believe this is the first report comparing the effects of different opioid-based anesthetic regimens on early recovery from orthognathic surgery, and we believe this report may be used as the starting point for a controlled study," Chegini and colleagues conclude.

**More information:** [Abstract](#)  
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