Opioid use down with 'enhanced recovery after surgery' program

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(HealthDay)—An "enhanced recovery after surgery" (ERAS) program is

associated with a significant reduction in opioid consumption after gynecologic surgery with no increase in pain scores, according to a study published in the August issue of *Obstetrics & Gynecology*.

Larissa A. Meyer, M.D., M.P.H., from the University of Texas MD Anderson Cancer Center in Houston, and colleagues examined the effect of an ERAS program as part of a quality improvement initiative on perioperative outcomes. Researchers compared clinical outcomes of 607 women undergoing open gynecologic surgery before or after implementation of ERAS. Patient-reported outcomes were compared using the MD Anderson Symptom Inventory-Ovarian Cancer for 293 patients.

The researchers found that patients in the ERAS pathway had a 25 percent decrease in median length of stay. In the ERAS group, patients had a 72 percent reduction in median opioid consumption; during admission up to postoperative day three, 16 percent were opioid-free. No difference in pain scores was reported. Patients in the ERAS group reported less fatigue, interference with walking, and total interference during hospitalization. There were no significant differences in complications, readmission rates, or reoperation rates between the two groups.

"Implementation of an ERAS program was associated with significantly decreased opioid use after surgery and improvement in key patient-reported outcomes associated with functional recovery after surgery without compromising pain scores," the authors write.

One author disclosed financial ties to the biopharmaceutical industry.

More information: Abstract/Full Text (subscription or payment may be required)