American Pain Society

membership

Search the APS Web Site

the journal of pain aps bulletin publications continuing education decade of pain advocacy & policy



American Pain Col Society

LOG IN TO MEMBERS ONLY AREA

THE APS ONLINE STORE

International and Regional Societies

Classified and Recruitment Advertis Last Updated 4/11/06

Give us feedback about our web site

Contact the Editor: Michael E. Clark, PhD webeditor@ampainsoc org

Contact APS American Pain Society 4700 W Lake Ave Glenview IL 60025 847-375-4715 fax: 877-734-8758 [Toll Free] info@ampainsoc.org

Site Guide

Annual Meeting

Perform a new search

Year: 2006

Poster #: 858

Title: High frequency TENS reduces pain intensity and analgesic requirement after inguinal hernioplasty

Authors: J DeSantana, V Santana Filho, D Guerra, W Silva Jr., R Gurgel, G Lauretti; School of Medicine of Ribeirão Preto, Ribeirão Preto, Brazil

Classification: Treatment Approaches (Physical)

Themes: TENS/Counterstimulation

Description:

This randomized, double-blind and controlled study aimed at verifying the effect produced by TENS in the postoperative pain and analgesic consumption in the 24 hours after surgery, moreover to analyze the satisfaction of patient. The sample was composed of 45 men who were distributed in one of the three groups (TENS, Analgesic or Placebo). High-frequency TENS (100Hz) and pulse duration of 50 is were used during 30 minutes of application with four electrodes near to surgical dermatome. The numerical scale (0-10cm) was used to assess the patient's levels of postoperative pain and satisfaction before and after each TENS therapy. TENS application occurred in 0, 2 and 4 hours in the postoperative period, in which pain intensity and satisfaction were measured before and after this intervention. These variables also were measured in postoperative 8 hours and in the discharge. Kruskal Wallis, Wilcoxon Signed Ranks and Tukey Tests were used to analyze the data. Data with P values < 0.05 were considered statistically significant. The patients included in the TENS group required less analgesics (p<0.01). Pain intensity was reduced in 2, 4, 6 hours (p<0.05), 8 hours after the surgery (p<0.03) and in the discharge (p=0) in the TENS group. In the TENS group, there was a reduction in the pain intensity in postoperative 2 and 4 hours (p<0.01), when compared with placebo group. In relation to patient's satisfaction level, last two measurements were significantly major in TENS group (p<0.05). High frequency TENS was more effective therapy to diminish pain intensity and analgesic consumption after hernioplasty, which provides mild to moderate pain, compared to placebo or dypirone administration at clock time. Thus, 100Hz TENS seems an effective therapy to decrease the pain intensity and the analgesic consumption after hernioplasty.