

4<sup>th</sup> International Conference on

# PAIN MEDICINE

October 19-20, 2017 San Francisco, USA

## Intravenous versus oral acetaminophen for adjunctive pain management in patients undergoing spinal fusion surgery

**Craig CM** and **Peterson C**

Hospital for Special Surgery, USA

**Statement of the Problem:** Patients undergoing spine surgery are often limited in their pain medication options, as providers are often reluctant to utilize non-steroidal anti-inflammatory medications, and opioids have become a mainstay of management for such patients. Opioids are used commonly in this setting and have significant untoward effects. Intravenous acetaminophen holds promise for adjunctive pain management in this clinical setting, and may have opioid sparing effects. However, it is unknown if intravenous acetaminophen is more effective than oral acetaminophen in for such patients.

**Methodology:** We are conducting a single-center, randomized clinical trial of intravenous versus oral acetaminophen in immediate post-operative care of 1 and 2 level lateral interbody spinal fusion surgery. Our primary endpoint is improvement in Visual Analog Scale for pain, and secondary endpoints include length of stay, opioid-equivalent dosing used during hospital stay, time to ambulation, and Oswestry Disability Index score. A total of 166 consecutive patients will be enrolled, consisting of 83 patients in each arm of the study who meets the inclusion criteria.

**Results:** Results of this ongoing trial are pending at this time, and scheduled to be finalized in March of 2017.

**Conclusions & Significance:** Conclusions are pending at this time. The results of the trial will be helpful whether IV acetaminophen is superior or equivalent. There are potential cost savings if equivalence is demonstrated. There is a potential new use and additional pain medication option if superiority is identified for intravenous acetaminophen.

craigch@hss.edu