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Evaluation of regional anesthesia procedure in the emergency department and prehospital care: A regional survey

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Introduction: The regional anesthesia (ALR), initially restricted to anesthetists, is underused in emergency medical department, often due to lack of training. 10 years after French recommendations, a regional investigation, was realized to estimate the practice of the ALR of the emergency physicians.

Material & Methods: This descriptive study, multicenter was led during period from January 1st till April 30th, 2012 in France.

Results: We collected 144 responses from 317 physicians in the 46 emergency departments. The rate of participation amounted to 45.4%. 55% doctors had more than 10 years' experience and 70% had an activity in the emergency care and pre hospital care. 71% physicians practiced the ALR, among which 46% were without training. The indications were: Against pain (71%), explorer (60%) or during reduction of fracture or dislocation (52%). The most had not met complications (96%). There was a statistical association between the experiment of the doctor and the practice of the ALR ($p=0.01$). 72% physicians judged the use of ALR. However, the emergency physicians underlined a lack of training (70%), rare indications (45%), fear (8%) and lack of interest (4%). 89% realized the femoral block respectively and 32%, 20% and 3%, the block of the hand, face and the foot. The majority had a favorable opinion for the learning of the regional anesthesia.

Conclusion: The benefit of regional anesthesia in the emergency units is well established not only due to its effectiveness but also due to its simplicity, ease of use and the lack of overall impact. In spite of the recommendations, it turns out that there is a misunderstanding and a real need for training among the emergency physicians including the young graduates.

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