POSTOPERATIVE PAIN MANAGEMENT AND DELIRIUM

Postoperative delirium (POD) is a common postoperative complication in older patients and may increase morbidity and mortality. The etiology of POD is multifactorial and suggested to be the result of interactions between patient vulnerability (predisposing factors) and exposure to precipitating factors. Poorly controlled postoperative pain has been identified as a precipitating risk factor for POD. However, effective pain management strategies to reduce incidence of POD are still far from being elucidated. Postoperative pain management techniques in older patients have changed substantially in recent years; for example, peripheral nerve blocks and multimodal analgesia have become common adjunctive techniques. It is unclear, however, whether these pain control management techniques can change the incidence of POD. I will review opioid analgesics, which are the most commonly used postoperative pain medications for major surgery. In addition, pain management techniques will be discussed; intravenous patient-controlled analgesia, epidural analgesia, peripheral nerve blocks, multimodal analgesia, and structured pain management protocols in multi-component delirium intervention.

Biography
Sakura Kinjo is an anesthesiologist and pain management physician at University of California, San Francisco. She is graduated from the Ryukyu University, Faculty of Medicine, Nishihara Cho and Okinawa, Japan in 1994. Kinjo is affiliated with UCSF Medical Center Parnassus. Her research interests are acute pain management, postoperative cognition and regional anesthesia.

Sakura.Kinjo@ucsf.edu