

## البحث الأول

### عنوان البحث باللغة الإنجليزية:

**Erector spinae plane block for postoperative analgesia in patients undergoing total abdominal hysterectomy: a randomized controlled study original study.**

### ملخص البحث الأول باللغة الإنجليزية:

**Background:** Abdominal hysterectomy is associated with marked postoperative pain and morbidity, but effective postoperative analgesia provides early recovery and ambulation.

**Aim:** We intended to assess the efficacy of bilateral erector spinae plane block (ESPB) on postoperative analgesia in females undergoing abdominal hysterectomy under general anesthesia.

**Settings and Design:** The design was a prospective, randomized, controlled, single-blind clinical study.

**Patients and Methods:** Sixty patients with American Society of Anesthesiologists ASA physical status classes I to III were scheduled for elective abdominal hysterectomy under general anesthesia, patients were randomly allocated into two equal groups. ESPB patients received ultrasound-guided ESPB at T9 vertebrae level with 20 ml bupivacaine 0.5%. Control group patients did not receive a block. Total fentanyl consumption in the first 24 h and visual analogue scale (VAS) score for pain were evaluated postoperatively. Unpaired Student's t-tests, chi-square tests, and Z tests were used to compare groups.

**Results:** No significant differences were recorded between the groups regarding age, weight, ASA physical status, or surgery duration, Total fentanyl consumption in the first 24 h was significantly higher in the control group than the ESPB group ( $P=0.003$ ;  $485\pm 20.39$  mcg vs  $445\pm 97.49$  mcg, respectively), VAS for pain was significantly higher in the control group for the first 12 h postoperatively.

**Conclusions:** Bilateral ESPB provided effective postoperative analgesia and markedly decreased postoperative fentanyl consumption in patients undergoing an abdominal hysterectomy.