

4. Fellows - Young Anaesthesiologists & Young Physicians FORUM

Presentation I: Chronic Pain after hospitalization in intensive care unit

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Patients admitted to Intensive Care Units (ICU) suffer from critical illness and have the highest mortality rates among hospitalized patients. For those who survive, recovery is often a prolonged rehabilitation period with physical, cognitive and psychological dysfunction. Pre-existing chronic pain, previous impairment in quality of life due to health problems, but also the critical illness itself and organ support with multiple interventions, predispose to the development of chronic pain in the post-critical period, making it difficult to return to the pre-disease functional status. Opioid administration during mechanical ventilation is a common practice, frequently without reliable or systematic assessment of pain and individualized titration of dosage. Multimodal analgesia, including dexmedetomidine, ketamine, adjuvant medication and regional analgesia techniques can prevent chronic pain and treat withdrawal symptoms during opioid weaning. Early mobilization and physiotherapy as soon as the patient's condition becomes stable, continuous assessment of pain and its corresponding treatment during hospitalization and the following period, individualized titration of opioids and follow-up by a team of specialists during rehabilitation, comprise a successful management plan for early recognition of complications and effective aftercare treatment of these patients.