

عنوان مقاله:

Comparing the Incidence of Postdural Puncture Headache (PDPH) between Median and Paramedian Approaches in Nephrolithotripsy under Spinal Anesthesia

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خلاصه مقاله:

Background: Spinal anesthesia is one of the safest anesthetic procedures with low complications. The most common complication is a headache after surgery or Postdural Puncture Headache (PDPH). It is important to know the factors that effect on PDPH. The aim of this study was to compare the median and paramedian methods in the incidence of PDPH in patients undergoing nephrolithotripsy by spinal anesthesia. Methods: This clinical trial study was performed on 50 patients who underwent percutaneous nephrolithotomy (PCNL) or nephrolithotripsy referred to Jahrom Peymanieh Hospital in 2019. The patients were randomly divided into two groups of 25 patients. PDPH is defined as bilateral headache in the frontal or occipital region, or neck pain, aggravated by sitting or standing. The data were collected once a day for 7 days after surgery by an uninformed person and then the incidence and prevalence of PDPH were recorded. Patients were followed up by telephone. Data analysis was performed using descriptive and inferential statistics. Result: No statistically significant distinctions were observed between the two groups in relation to age, gender, and weight. Both the median and paramedian groups exhibited a decrease in the occurrence of postdural puncture headache (PDPH), with a slight elevation noted in the paramedian group. However, no noteworthy variations between the two groups were found on any of the assessed days ($p > 0.05$). Conclusion: The results of this study showed that there was no difference in the incidence of PDPH incidence in both groups; however, paramedian approach is better than median approach in the frequency of PDPH. Therefore, it is recommended that the paramedian method will be used for spinal anesthesia in patients undergoing PCNL.

کلمات کلیدی:

Paramedian, Median, Spinal anesthesia, PCNL, PDPH

