Utilization of Non-narcotic Analgesics & Adjunctive Medications for Postoperative Symptom Relief Following Endoscopic Urologic Surgery in Pediatric Patients

Jessica K. Goeller, DO¹ Fernando A. Ferrer, Jr., MD² Evan M. Roberts, BS, MB(ASCP)³ John H. Makari, MD, MHA, MA²

Departments of ¹Anesthesiology and ²Surgery, Division of Urology. ³Child Health Research Institute Children's Hospital & Medical Center and University of Nebraska Medical Center, Omaha, NE, USA.





Presenter Disclosures

| Consultant/ | No Disclosures. |
|---|---|
| Speakers bureaus | |
| Research funding | No Disclosures. |
| Stock ownership/Corporate boards-employment | No Disclosures. |
| Off-label uses | Oxybutynin (indication, age-related) Tolterodine, darifenacin, fesoterodine, solifenacin, trospium (no pediatric) Tamsulosin, doxazosin, prazosin (indication, no pediatric) Phenazopyridine (age-related) |



Background

Opioid epidemic

- How are practicing Pediatric urologists utilizing non-narcotic analgesics and adjunctive medications in Pediatric Urologic endoscopy?
- What opportunities exist for opioid-sparing pain and symptom management?



Methods

Survey Monkey®

- 345 active SPU members
- Demographic data
- Specific endoscopic case scenarios
 - Cystoscopy w/wo biopsy/incision/resection, stent placement, catheter placement
 - Ureteroscopy w/wo stent placement
 - Subureteric injection
- Prescribing/administration preferences related to patient age and/or weight parameters
 - acetaminophen, ibuprofen, phenazopyridine, anticholinergics, α-blockers, ketorolac, viscous lidocaine



Results

72 respondents (21% response rate)





Results

PEDIATRIC FELLOWSHIP

72 respondents (21% response rate)

3% Academic 5% New England 1% 17% 7% 17% Hospital New York Non-Academic 10% Mid-Atlantic Hospital 3% Yes Northeastern Multispecialty 6% 18% 11% Group No Southeastern Single Specialty North Central 68% Group South Central 22% Solo Practice 15% Western 97%

PRACTICE SETTING



AUA SECTION

Results

- Most pediatric urologists utilize acetaminophen, ibuprofen and viscous lidocaine in all pediatric urologic endoscopy case scenarios presented.
- Anticholinergic medication (e.g. oxybutynin) appears to be utilized more frequently with stent placement or bladder biopsy.
- Alpha-blockers, phenazopyridine and ketorolac are used less frequently in all scenarios presented.
- Pediatric urologists utilize acetaminophen, anticholinergic medication and viscous lidocaine more frequently without age or weight restrictions than the other medications presented.
- Most pediatric urologists do not give non-narcotic analgesics and adjunctive medications preoperatively.



Conclusions

- Pediatric Urologists seem to routinely utilize acetaminophen, ibuprofen and viscous lidocaine for analgesia following pediatric urologic endoscopy
- Opportunities for incorporating more frequent use of additional non-narcotic analgesics and adjunctive medications for postoperative symptom relief exist
- Opportunities for post-operative symptom relief may exist in the pre-operative setting





