

## Assessment of the morphine-sparing effect and analgesic efficacy of nefopam after colorectal surgery in cancer patients

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*Introduction.* The study presents data of nefopam efficacy in the treatment of postoperative pain in cancer patients after colorectal surgery. Adverse side effects were also evaluated.

*Material and methods.* 32 cancer patients after colorectal surgery were included into the study. Central randomization was used. In the control group (n=16) patients received morphine intravenously by a patient-controlled analgesia pump (PCA). In the treatment group (n=16) patients received additional analgesia with nefopam 20 mg intramuscularly every 6 hours. Morphine consumption and postoperative pain intensity assessments on visual analog scale (VAS) were compared during 24 hours observation period. Adverse side effects, serum transaminase levels, return of intestinal peristalsis, hospitalization time were also evaluated.

*Results.* Statistically significant lower morphine consumption was recorded in the treatment group. The incidence of dry mouth, headache, dizziness, drowsiness and shivering were similar in both groups. Sweating was recorded more often in the group treated with nefopam. The difference was statistically significant. There were not observed significant differences in median values of other measured parameters.

*Conclusions.* These findings suggest that the combination of nefopam and parenteral morphine can be used for the treatment of postoperative pain. It is important to remember about contraindications to nefopam such as monoamine oxidase inhibitors, antidepressants, epilepsy, glaucoma, coronary artery disease, tachycardia.

**Key words:** postoperative pain, nefopam, cancer, colonrectum, PCA, morphine, transaminases, sweating, tachycardia

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