Keefektifan terapi vibrasi dibandingkan dengan penggunaan turniket dan lidokain 40 mg untuk mencegah nyeri penyuntikan propofol = Effectivity of vibration therapy compared to combination of tourniquet application and administration of 40 mg lidocain in preventing pain sensation from propofol injection

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Abstrak

Latar Belakang: Nyeri penyuntikan propofol merupakan efek samping yang paling sering dikeluhkan dan memberikan trauma pada pasien anestesi umum. Metode paling efektif mengurangi nyeri penyuntikan propofol adalah penggunaan turniket dan lidokain 40 mg. Terapi vibrasi digunakan untuk mencegah nyeri penyuntikan. Penelitian ini bertujuan membandingkan keefektifan terapi vibrasi dengan penggunaan turniket dan lidokain 40 mg untuk mencegah nyeri penyuntikan propofol.
Metode:Penelitian ini bersifat uji klinis acak tersamar tunggal terhadap pasien usia 18-65 tahun yang menjalani anestesia umum dengan menggunakan propofol di Instalasi Bedah Kirana RSCM pada bulan Juni-Juli 2018. Sebanyak 104 subyek didapatkan dengan metode consecutive sampling dirandomsasi menjadi kelompok terapi vibrasi (n=52) dan kelompok turniket dan lidokain 40 mg (n=52). Kekerapan nyeri dan derajat nyeri berdasarkan NRS (Numerical Rating Scale dicatat. Analisa data menggunakan uji Chi Square.
Hasil: Kekerapan nyeri berbeda signifikan terapi vibrasi sebesar 15,4% sedangkan turniket dan lidokain 40 mg sebesar 3,8% (p 0,046). Derajat nyeri penggunaan turniket dan lidokain 40 mg yaitu nyeri ringan 3,8% dan tidak nyeri 96,2%, sedangkan penggunaan terapi vibrasi yaitu nyeri ringan 15,4% dan tidak nyeri 84,6%.
Simpulan: Penggunaan terapi vibrasi secara statistik tidak lebih efektif dibandingkan penggunaan turniket dan lidokain 40 mg.
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Background: Pain during the Propofol injection is the most frequently complained and adverse side effect in general anesthesia patients. Currently, the most effective method of reducing pain in propofol injections is to combine application of tourniquet and lidocaine 40 mg. therapy can be used to prevent pain during injection pain. This study aims to compare the effectiveness of vibration therapy with the use of tourniquet and lidocaine 40 mg to prevent pain in injecting propofol.
Method: This study was a single blind randomized clinical trial of patients aged 18-65 years who underwent general anesthesia using propofol in the Kirana RSCM Surgical Installation in June-July 2018. A total of 104 patients were obtained by consecutive sampling method, then divided onto two groups, a vibration therapy group (n = 52) and the tourniquet group and lidocaine 40 mg (n = 52). The frequency of pain and the degree of pain based on the Numerical Rating Scale (NRS) were recorded. Data analysis were done using Chi Square test.
Results: Pain frequency was significantly different from vibration therapy by 15.4%, while tourniquet and lidocaine 40 mg was 3.8% (p 0.046). Degree of pain based on NRS use of tourniquet and lidocaine 40 mg is mild pain 3.8% and painless 96.2%, while the use of vibration therapy is mild pain 15.4% and no pain 84.6

% .

Conclusion: The use of vibration therapy is not statistically more effective than the use of tourniquet and lidocaine 40 mg.