



Improving perioperative pain management in South Africa: is it feasible to implement a bundle approach to care in a middle-income country? [TU510]



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Background

This project explores the feasibility of implementing a bundled approach to perioperative pain management in eleven hospitals. The central aim was to assess fidelity to the four-part bundle. Was it feasible to implement the bundle and what were the challenges of implementation in the unique context of a middle-income

Baseline evaluation of clinical practice

 PAIN OUT registry over a minimum of 3 months



Pain severity



Pain interference



Intraoperative processes



Postoperative care

country.

Methods

Implementation of a 4-part bundle of care

Follow-up evaluation of practice

 PAIN OUT registry over a minimum of 3 months



Full daily dose nonopioids



Regional or local anaesthesia



Provide information on pain management



Assess and reassess pain



Pain severity



Pain interference

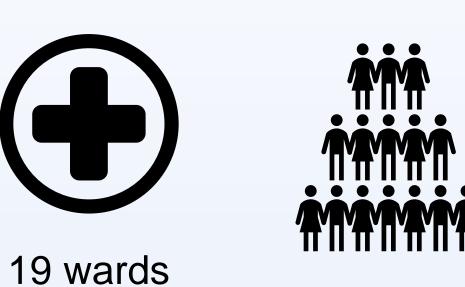


Intraoperative processes



Postoperative care

Results

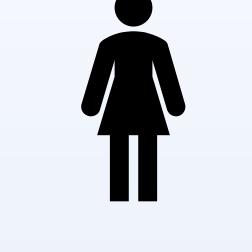


85% received information

on pain management

11 hospitals

3292 patients



75% female

60% received full daily dose

non-opioids





91% received regional or

local anaesthesia

received the full bundle

49% O&G

25% Ortho

Challenges to implementing the bundle:

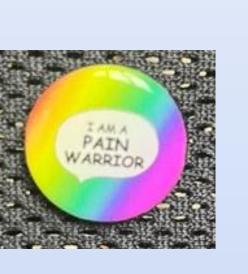
- 1. Perceptions of risk with NSAIDs
- 2. Lack of drug availability at institutions
- 3. Opiophobia and fear of multimodal analgesia
- 4. Hierarchical team structures
- 5. Poor documentation of intraoperative treatments
- 6. High staff turnover and staffing cuts

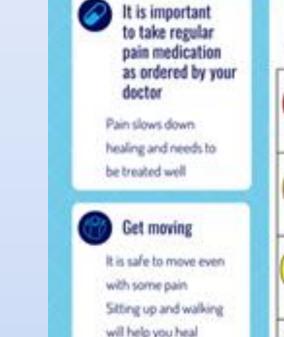
Facilitators to implementing the bundle:

Team education and training with efficient routes of communication

Results

- 2. Changing team culture
- 3. Pain Warriors
- 4. Protocols on display
- 5. Surgical buy-in





Think of something you

Focusing on

music, watch tv

something you enjoy



Talking to loved ones

will help treat your pain



sister/nurse of

your pain score





Do you have pain?

Conclusion

We have demonstrated that it is feasible to implement a four-part perioperative pain management bundle in multiple wards at a range of hospitals in a middleincome country. Key elements to support bundle implementation included training of multidisciplinary teams, removing hierarchy and facilitating team communication.

Acknowledgements

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76% had their pain

assessed