



Update the Acute Trauma Pain Control Algorithm

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Received: May 20, 2024
Revised: June 2, 2024
Accepted: June 25, 2024

Keywords: Pain control, Trauma, Algorithm.

Please cite this paper as:

Shams AH, Ahadi M, Karajizadeh M, Paydar S. Update the Acute Trauma Pain Control Algorithm. *Bull Emerg Trauma*. 2024;12(3):146-147. doi: 10.30476/beat.2024.104108.1542.

Dear Editor

We are writing to express our appreciation for the insightful article on pain management in trauma patients and its critical role in improving patient outcomes [1]. The current protocol, which includes acetaminophen and opiate agents, has proven to be remarkably effective. However, recent studies have indicated that the analgesic effects of acetaminophen and NSAIDs together might be more effective than those of either agent alone, potentially surpassing the effect of opioids [2].

Integrating NSAIDs into the pain management protocols could provide several benefits, including enhanced pain relief [3] and reduced opioid consumption [4]. This, in turn, could reduce the risk of chronic pain, minimize the probability of opioid dependency, and enhance overall patient satisfaction.

While recognizing the challenges associated with implementing new protocols, we believe that incorporating acetaminophen plus NSAIDs into the existing pain management algorithm could be a valuable step toward optimizing care for trauma patients. Figure 1 shows a revised proposed algorithm

based on your previously published protocol for managing acute pain in trauma patients.

Declaration

Ethics approval and consent to participate: Not applicable.

Consent for publication: All authors have read and given their consent for publication of this manuscript.

Conflict of interest: The authors declared that they had no conflict of interest.

Funding: No funding.

Authors' Contribution: AHS, MA, MK, and SP designed and coordinated the study. AHS and MK drafted the manuscript. AHS, MA, MK, and SP critically reviewed the manuscript. All authors have read and approved the manuscript.

Acknowledgment: Not applicable.

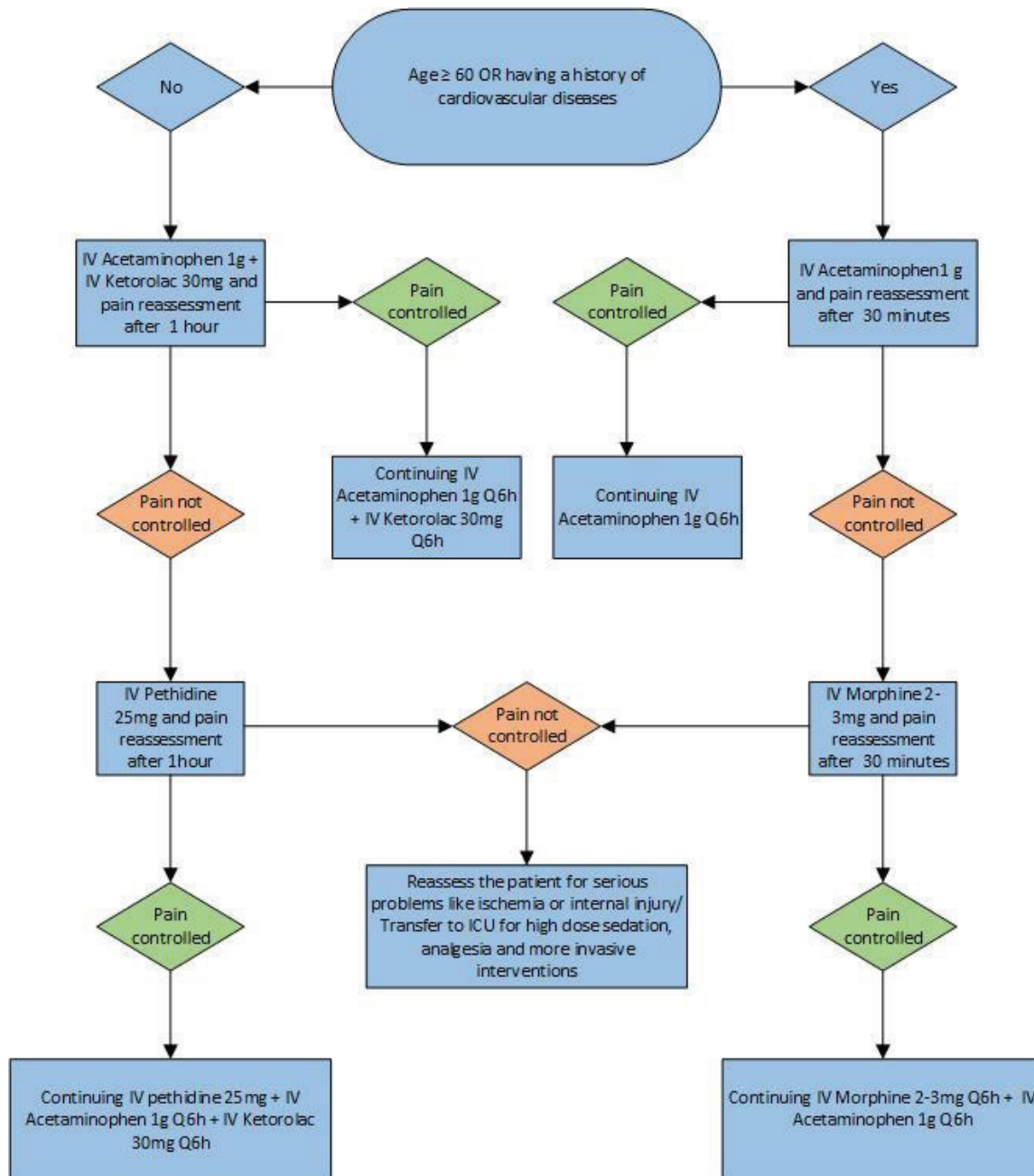


Fig. 1. The updated protocol of pain management in adult trauma patients with three or more unilateral rib fractures and GCS>13

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