

*Rathod J.***SPINAL ANAESTHESIA AS A SAFE ALTERNATIVE  
FOR LAPAROSCOPIC CHOLECYSTECTOMY***Tutor: assistant Morozova N.I.**Department of Anaesthesiology and Reanimatology**Belarusian State Medical University, Minsk*

**Relevance.** Laparoscopic cholecystectomy is the best standard for the treatment and minimal invasive surgical procedure used for the removal of a diseased gallbladder/ symptomatic cholelithiasis it has gained worldwide acceptance since 1990s and replaced the open technique for cholecystectomy. Laparoscopic cholecystectomy is generally done under general anaesthesia due to precise control of ventilation under controlled conditions in general anaesthesia has proven and also due to the respiratory changes caused by pneumoperitoneum, which is an integral part of laparoscopy. So person is unconscious during this surgery and have no memory about it. spinal anaesthesia (spinal block) is a form of neuraxial regional Anaesthesia through fine needle (9cm long). It has some advantages over general anaesthesia like the consciousness of patient during procedure, less postoperative pain and the ability to ambulate earlier than patients receiving general anaesthesia also nausea and vomiting is lesser than general anaesthesia.

**Aim:** to assure that spinal anaesthesia is feasible and also as safe alternative for laparoscopic cholecystectomy.

**Materials and methods.** An analysis of the data from surgical department of laparoscopy, in which around 40 patients were under observation after laparoscopic cholecystectomy surgery and their characteristics are recorded (no of patients, age, gender, BMI). Primary outcomes evaluated included postoperative pain score using visual analogue scale to access abdominal pain. We can also evaluate intraoperative events including hypotension, right shoulder pain, nausea, vomiting; post operative complications like nausea, vomiting, urinary retention, overall morbidity etc. and noted the procedure of anaesthesia is spinal or general anaesthesia for evaluation.

**Results and their discussion.** There was no significant difference in visual analogue scale during first 24hrs. The less postoperative pain within 12 hr and post operative complications were found in spinal anaesthesia. In post operative abdominal pain, there was no significant difference between spinal anaesthesia and general anaesthesia in 24 hr. After this time period pain is reduced in spinal anaesthesia maybe to Persistent neuraxial blockade

**Conclusion:** spinal anaesthesia is feasible, safe alternative for elective laparoscopic cholecystectomy.