

Anesthesiology Rounds
October 2003

PCA: Additions or Alternatives to Morphine
François Fugère MD, FRCPC

Objectives:

- To become familiar with the alternatives to morphine as an analgesic for intravenous PCA.
- To become familiar with the recommendations on the use of meperidine for intravenous PCA.
- To become familiar with possible additions to morphine to improve pain-relief during intravenous PCA.

Answer the following questions (only one right answer)

1. What is the maximum daily intravenous dose of meperidine recommended by Simopoulos?
 - a) 5 mg/kg for 6 days
 - b) 10 mg/kg for 6 days
 - c) 10 mg/kg for 3 days
 - d) 15 mg/kg for 2 days
 - e) 15 mg/kg for 3 days
2. Which one of the following statements about intravenous PCA is not true?
 - a) It has been reported that the power ratio between morphine and hydromorphone might differ when PCA is used for an extended period.
 - b) 60 µg doses of fentanyl have been associated with numerous side effects.
 - c) Compared to morphine, sufentanil and alfentanil have been associated with more boluses administered.
 - d) Even though alfentanil is short-acting, a continuous infusion is not recommended during PCA.

3. The recommended dosage ratio for intravenous morphine-ketamine PCA is:

- a) 1:2
- b) 2:1
- c) 1:1
- d) 3:1
- e) 5:1

4. Which of the following statements about the combinations used for intravenous PCA is false?

- a) The morphine-clonidine combination has been associated with a reduction in pain, less nausea/vomiting and greater patient satisfaction than morphine alone.
- b) It is better to combine droperidol with morphine in the same syringe than to administer droperidol alone.
- c) The alfentanil-propofol combination has been successfully used as a sedative for certain procedures.
- d) Magnesium sulfate could be used with an opiate to improve pain-relief.

Please send the completed test by fax to the attention of the Committee for Continuing Education, Université de Montréal at 514-343-6913. We will fax your corrected test back to you.

Name: _____

Address: _____

City: _____ Province _____ Postal code _____

Phone: _____ Fax: _____

Email: _____