Title: Epidural Meperidine for Pain Management after Orthopedic Surgery: Clinical Effectiveness and Guidelines for Use

Date: 20 June 2008

Research question:

1. What is the clinical effectiveness of epidural meperidine, with or without a local anesthetic, for the management of pain after orthopedic surgery?

2. What are the guidelines for the use of epidural meperidine, with or without a local anesthetic, for the management of pain after orthopedic surgery?

Methods:

A limited literature search was conducted on key health technology assessment resources, including PubMed, the Cochrane Library (Issue 2, 2008), University of York Centre for Reviews and Dissemination (CRD) databases, ECRI, EuroScan, international HTA agencies, and a focused Internet search. Results include articles published between 1998 and June 2008, and are limited to English language publications only. No filters were applied to limit the retrieval by study type. Internet links are provided, where available.

Results:

HTIS reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews and meta-analyses are presented first. These are followed by randomized controlled trials (RCTs), observational studies and evidence-based guidelines.

One guideline was identified pertaining to the clinical effectiveness and safety of epidural meperidine for the management of pain. No health technology assessments, systematic reviews, RCTs, or observational studies were identified. Additional information that may be of interest has been included in the Appendix.

Disclaimer: The Health Technology Inquiry Service (HTIS) is an information service for those involved in planning and providing health care in Canada. HTIS responses are based on a limited literature search and are not comprehensive, systematic reviews. The intent is to provide a list of sources of the best evidence on the topic that CADTH could identify using all reasonable efforts within the time allowed. HTIS responses should be considered along with other types of information and health care considerations. The information included in this response is not intended to replace professional medical advice, nor should it be construed as a recommendation for or against the use of a particular health technology. Readers are also cautioned that a lack of good quality evidence does not necessarily mean a lack of effectiveness particularly in the case of new and emerging health technologies, for which little information can be found, but which may in future prove to be effective. While CADTH has taken care in the preparation of the report to ensure that its contents are accurate, complete and up to date, CADTH does not make any guarantee to that effect. CADTH is not liable for any loss or damages resulting from use of the information in the report.

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Health technology assessments
No literature identified.

Systematic reviews and meta-analyses
No literature identified.

Randomized controlled trials
No literature identified.

Observational studies
No literature identified.

Guidelines and recommendations

   See recommendation 26

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Appendix – further information:

Observational studies


Review articles


Additional references