

## EVALUATION OF THE USE OF ANTIBIOTICS, THROMBOLYTIC AND ANALGESIC AGENTS AND ASSOCIATED OUTCOMES IN PATIENTS SUBMITTED TO BARIATRIC SURGERY IN A HOSPITAL OF PORTO ALEGRE, RS/BRAZIL.

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**Introduction:** Obesity represents an important load to the public health system. Morbid obesity (IMC  $\geq 40$  kg/m<sup>2</sup>) is a generally non-responsive disease to diet and pharmacological treatment; however, it seems to be responsive to bariatric surgery (BS). Results from this procedure show that the surgery is effective in weight reduction and in the control of some co morbidities. Individuals with IMC 35-39.99 kg/m<sup>2</sup> and co morbidities (such as diabetes and arterial hypertension) may also benefit from BS. In 2008 3,195 BSs were performed in Brazil (costs=R\$ 15.7 million to Sistema Único de Saúde-SUS). It may combine restriction and desabsortion in different degrees depending on the technique employed and the extension of small intestine excluded from alimentary flow. Fobi-Capella is among the most commonly used procedures for BS. Surgical site infection (SSI) and venous thromboembolism (VT) are two main complications of BS. SSI occur in 1-10% of obese patients, however it may occur in rates as high as 15-20% according to some authors, depending on the surgical procedure employed. VT incidence is higher in obese patients and prophylaxis may reduce the incidence. Protocols to prevent VT and SSI, however, are not fully adopted. The influence of the use of analgesic agents on SSI is under investigation in the medical literature.

**Objectives:** To evaluate the influence of antibiotics, thrombolytic, and analgesic agents in the occurrence of post-surgical complications (SSI, according to Center for Disease Control and Prevention criteria; pain, according to a previously validated score; coagulation events such as deep venous thrombosis, pulmonary thromboembolism, and bleeding) in patients submitted to BS in a hospital in Porto Alegre, RS. Specific objectives: to identify antibiotics and thrombolytic agents used and the posology adopted in prophylaxis. To identify and quantify analgesic agents employed in the post-surgical period, and to investigate the eventual influence on SSI. The incidence of pain and post-surgical complications will be estimate.

**Material and methods:** The study design will be a non-controlled cohort with morbidly obese adult patients submitted to BS (Fobi-Capella procedure) at Hospital Nossa Senhora da Conceição (HNSC), Porto Alegre/RS. Variables in the study will be use of antibiotics, thrombolytic and analgesic agents (name, class, dose, beginning and end, period of administration). Heparin is used as thrombolytic prophylaxis at HNSC. Specific protocols directed to antibiotic prophylaxis and analgesia are not used in the institution. Data about BS will be obtained from the patient's charts. Patients will be interviewed to evaluate pain and use of analgesic agents in 24, 48, and 72 hours after surgery. Charts will be reviewed after 15 and 30 days in order to verify the occurrence of the outcomes described above. We calculated the sample size considering a frequency of 1.5% of SSI, a confidence interval of 95% and 0.1% in the variation of frequency obtaining a number of 108 patients that is expected to be achieved in approximately 18 months. Statistical analysis will be performed with use of SPSS program v.18.0. Central trends measurements, dispersion and evaluation of association using chi-square test ( $\chi^2$ ) will be used to test the statistical significance among proportions. A  $p < 0.05$  value will be accepted as significant. The study will follow the resolution 196/96 (Conselho Nacional de Ética em Pesquisa), assuring signet of identity and information of patients and being respectful with biosafety rules.

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