

Use of EMLA Cream or Alfentanil for Analgesia during Ophthalmic Nerve Blocks

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Abstract

This prospective double-blind study compared the effectiveness of EMLA with alfentanil and placebo in reducing the overall pain during ophthalmic nerve blocks. Seventy-five patients scheduled for cataract surgery were divided into three groups. Patients in the EMLA group had EMLA cream applied over skin areas corresponding to injection sites for retrobulbar and facial nerve blocks one hour before the nerve blocks, and placebo intravenous normal-saline injection 2 minutes before the first nerve block. The alfentanil group had placebo cream applied and intravenous alfentanil 10 $\mu\text{g}\cdot\text{kg}^{-1}$ while patients in the placebo group received placebo cream and intravenous normal-saline at similar time intervals prior to the nerve blocks. Patients then received facial nerve blocks and retrobulbar block by the same surgeon. Pain scores by patients and independent observers were significantly lower in the EMLA and alfentanil groups compared to placebo ($P < 0.005$) with no significant difference between the EMLA and alfentanil groups.

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