

THE PROGRAM "ANHANCED RECOVERY AFTER SURGERY" FOR GUNSHOT WOUNDS OF THE CHEST

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Relevance. Conducted in 1990-2010 study revealed that a number of methods of management of patients in the perioperative period is ineffective:

- fasting and prolonged bowel prep before surgery;
- mandatory application of nasogastric probes;
- long-term drainage of postoperative wounds;
- prolonged bed rest.

The correction of these provisions are reflected in the "Enhanced recovery after surgery" (Kehlet H., 1997).

The purpose of the study. To study the effectiveness of using ERAS program in the treatment of victims of gunshot wounds of the chest (GWC) of peacetime.

Materials and methods. For treatment in Department of thoracic surgery 432 Main Military Clinical Center was 113 affected with GWC (80 – bullet and 33 gunshot shrapnel wounds). Performed surgery: 11 (9,8%) – surgical treatment wounds, 88 (77,9 %) – thoracocentesis and drainage of the pleural cavity, 12 (10,6%) – thoracotomy, 13 (11,5 %) – video-assisted thoracoscopic surgery (VATS).

Patients applied the main events of ERAS program.

The results and discussion. 5 (4,4%) patients developed empyema in 10 patients (8,8%) – pneumonia and in 10 (8,8 %) – suppuration of postoperative wounds. Dead 3 injured (2 – wounded hearts, the 1 – damage to the lung, esophagus and other internal organs). The mortality rate was 2,7%.

After thoracotomy postoperative complications were 58,3%, after drainage of the pleural cavity was 19,3%. Postoperative complications were minimal (7,7%) after VATS operations.

The duration of inpatient treatment after thoracotomy was of $57,3 \pm 2,1$ days after VATS operations was minimal of $28,1 \pm 2,3$ days.

Conclusions. A. The implementation of the "Enhanced recovery after surgery" for gunshot wounds of the chest requires teamwork, close interaction between nurses, surgeons of different specialties, anesthesiologists-resuscitators, rehabilitators, clinical pharmacologists, etc.

B. The implementation of the " Enhanced recovery after surgery" for gunshot wounds of the chest reduces the level of postoperative complications in 7 times, minimizes postoperative mortality and decreases the length of hospital period in 2 times.

C. Crucial value in the program "Enhanced recovery after surgery" for gunshot wounds of the chest belongs to optimal pain management in the perioperative period and the implementation of video-assisted thoracoscopic surgery.