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## Pain management of ICU patients with dexmedetomidine

Recently published guidelines recommend patient-centred ICU care with lighter sedation, the goal being a comfortable, calm and co-operative patient. Dexmedetomidine is an alpha<sub>2</sub>-receptor agonist indicated for light to moderate ICU sedation with additional analgesic properties.

Individually tailored pain management is an important part of a patient-centred ICU care. When possible, proper analgesia should precede sedation. Pain treatment should be individualised and frequently assessed. Opioids are important to ensure effective analgesia, but their exposure should not be too high and non-opioids such as dexmedetomidine are recommended to be used.

Pain is closely related to agitation and delirium in ICU patients. Pain in patients with unnecessary deep sedation is difficult to assess and therefore patients may remain undertreated despite of considerable pain. Lighter sedation is known to improve communication between the patient and family members and ICU staff. This in turn is likely to facilitate adequate pain management as patient reported pain is regarded more reliable than that derived secondarily from other symptoms or signs. Lighter sedation will also facilitate better quality of sleep, earlier mobilization, less delirium and decreased likelihood of long-term psychological and cognitive problems.

This presentation will review the main aspects of dexmedetomidine and its usage in sedation and pain management in the ICU.