

Sub-Tenon Versus Peribulbar Anaesthesia for Cataract Surgery

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Purpose: The aim of this study is to compare the efficacy of sub-Tenon anaesthesia with peribulbar anaesthesia in terms of intraoperative pain and ocular movement during cataract surgery.

Design: Prospective, cohort study.

Methods: A total of 50 patients were enrolled in the study between 1st July 2002 until 31 December 2002. 25 patients were randomly assigned to peribulbar anaesthesia (group A) and 25 patients sub-Tenon anaesthesia (group B). The surgeon observed and recorded whether there was eye movement during surgery or not. The movement was graded as: no movement, slight movement, moderate movement and full range of movement. Postoperatively, patients were asked whether they felt pain during surgery or not. Pain perception was graded as: no pain, slight discomfort, slight pain, moderate pain, severe pain, excruciating pain and unbearable pain. The effect of the type of anaesthesia on eye movement and pain perception was measured. Pearson Chi square test was used to determine the statistical significance for pain perception and eye movement.

Results: Pain perception was similar in both groups. The effect of type of anaesthesia on ocular movement was better in the sub-Tenon group.

Conclusion: Sub-Tenon anaesthesia is more effective in terms of ocular movement than peribulbar anaesthesia. Considering this and the known complications associated with peribulbar anaesthesia, the author recommends the use of sub-Tenon anaesthesia for cataract surgery.