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Perioperative Pain Management

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Message from the Guest Editor

Dear Colleagues,

Perioperative pain therapy is a multidisciplinary, multiprofessional challenge. Patient pain perception depends on a variety of influencing factors, such as general handling of pain, preexisting chronic pain, depression, anxiety, age, etc., which are certainly not addressed enough in everyday clinical practice. Preventive concepts, minimal invasive surgery, fast-track concepts, regional anesthesia, certain intravenous drugs applied while and after general anesthesia, reduced use of postoperative opioids, and the intraoperative use of distraction devices during regional anesthesia such as virtual reality glasses, etc. can all be useful to reduce postoperative pain. An intervention-related standardization of postoperative pain therapies with pain-level-adjusted escalating schemes should certainly be considered common sense. Furthermore, a postoperative acute pain service is an important part of structural quality for the supervision and management of patients with continuous pain procedures on the one hand and for the care of complex postoperative pain syndromes on the other.



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Special Issue



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