




Advances and Challenges in Postoperative Pain Management: Innovations in Anesthesia Techniques for Acute Care

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ARTICLE INFO

Article Type:

Comment

Article History:

Received
07 October 2025

Received in revised form
24 October 2025

Accepted
03 November 2025

Available online
01 December 2025

ABSTRACT

Postoperative pain management is a critical challenge in acute care that directly affects patient recovery, hospital stay, and complication rates. Inadequately controlled pain can cause physiological and psychological stress, delayed mobilization, and prolonged recovery time. Recent advances, including regional anesthesia (ultrasound-guided nerve blocks and epidural anesthesia) and multimodal analgesia combining non-opioid drugs, local anesthetics, and non-pharmacological methods, have improved pain control and reduced the need for opioids. Patient-controlled analgesia enables individualized treatment. Despite this progress, challenges remain owing to variability in patient responses, comorbidities, surgical factors, and the technical complexity of advanced anesthesia techniques. Balancing effective analgesia with early mobilization requires close team coordination. Innovations in drug delivery, long-acting agents, combination therapies, and Enhanced Recovery After Surgery (ERAS) protocols have improved precision and recovery outcomes. The future of postoperative pain management lies in personalized, patient-centered strategies supported by multidisciplinary collaboration, continuous evaluation, and evidence-based practice, ensuring safer, more effective, and tailored care for surgical patients.

Keywords: Postoperative pain management; Regional anesthesia; Multimodal analgesia; Enhanced Recovery After Surgery; Personalized pain management

Publisher:



Lorestan University
of Medical Sciences

Cite this article: Sharifian M, Marzban A. Advances and Challenges in Postoperative Pain Management: Innovations in Anesthesia Techniques for Acute Care. *Interdisciplinary Journal of Acute Care*. 2025; 6(2): 165-167. <https://doi.org/10.22087/ijac.2025.572381.1094>

Introduction

Postoperative pain management is one of the most important and complex challenges in acute care [1]. It directly affects the patient's quality of life, length of hospital stay, and postoperative complication rates. Inadequately controlled pain can cause physiological and psychological disturbances, increase immune system stress, and delay recovery of motor function.

In recent decades, significant advances have been achieved in anesthesia and postoperative analgesia, improving patient outcomes and reducing opioid dependence [2].

Critical Analysis

Regional anesthesia techniques, including ultrasound-guided peripheral nerve blocks and

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DOI: [10.22087/ijac.2025.572381.1094](https://doi.org/10.22087/ijac.2025.572381.1094)



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epidural anesthesia, have improved precision and minimized systemic adverse effects [3]. Multimodal analgesia strategies that combine non-opioid anti-inflammatory drugs, local anesthetics, and non-pharmacological techniques such as cold or heat therapy have further enhanced pain control and patient satisfaction [4, 5]. Patient-controlled analgesia (PCA) systems allow individualized dosing according to the patient's needs.

Despite these advances, several challenges remain to be addressed. Patient responses vary widely and are influenced by age, comorbidities, type of surgery, and prior chronic conditions [6]. The complexity of advanced anesthesia techniques and the need for specialized expertise may limit their broad implementation [7]. Achieving a balance between effective analgesia and early mobilization is essential to prevent postoperative complications and requires close coordination between the anesthesia and surgical teams [8].

Implications for Practice

Recent innovations in drug delivery systems, long-acting analgesics, and combination therapies have enabled more precise and personalized postoperative pain control. Enhanced Recovery After Surgery (ERAS) protocols reduce physiological stress, improve pain management, minimize opioid use, and accelerate functional recovery [9]. Patient education and clear expectation management are crucial for success. Regular assessments using standardized pain tools allow timely adjustments and help prevent chronic postoperative pain [4]. Interdisciplinary approaches and evidence-based practices further support integrated clinical decision-making [10].

Highlights

1. Postoperative pain management remains a critical challenge that affects recovery, hospital stay, and complication rates.
2. Advances in regional anesthesia, multimodal analgesia, and patient-controlled analgesia (PCA) have improved pain management outcomes.
3. Variability in patient response, surgical complexity, and technical requirements remains a major challenge.
4. Innovations in drug delivery and Enhanced Recovery After Surgery (ERAS) protocols have enabled personalized and safer pain control.
5. Multidisciplinary collaboration, patient education, and evidence-based practices are essential for effective postoperative analgesia.

Conclusion

Despite considerable progress, postoperative pain management remains an evolving field that requires continuous clinical research, specialized training, and technological innovation. Through coordinated multidisciplinary efforts and a focus on individual patient needs, postoperative pain experiences can be improved, complications can be reduced, and safe, effective, and patient-centered care can be achieved.

Authorship contribution statement

All authors have reviewed and approved the final version of the manuscript. MS conceived and designed the study. AM conducted the study and collected the data; AM, and MS performed the interpretation.

Ethical Consideration

Not applicable

Declaration of Competing Interest

The authors declare no conflicts of interest related to the development, analysis, or presentation of the concepts described in this manuscript. No financial or personal relationships influenced the work reported

Acknowledgments

Not applicable

Funding

This study did not receive any external funding.

Data Availability

Not applicable

Declaration of Generative AI

The authors declare that they have not used any type of generative artificial intelligence for the writing of this manuscript, nor for the creation of tables, or their corresponding captions.

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