

## **ACUTE DISTENSION OF ABDOMEN SECONDARY TO TRAMADOL**

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### **Summary**

Tramadol is a centrally acting opioid analgesic which is very commonly used in surgical patients. Tramadol 100mg i.v was administered to a patient who underwent elective cholecystectomy who developed acute distension of abdomen. Tramadol has many gastrointestinal adverse effect but no reports of distension of abdomen as seen in our patient.

**Key words:** Tramadol, Acute abdominal distension, cholecystectomy

### **Introduction**

Tramadol is a synthetic opioid analgesic acting through opioid receptor. Dose of 100mg i.v is equivalent to 10mg of morphine with good oral bioavailability and its effect lasts for 4-6hrs. Tramadol has gastrointestinal side effects which includes nausea, vomiting, diarrhea, anorexia, flatulence, dry mouth and other side effects are rash, dizziness, headache, and sedation, less respiratory distress and constipation, it can also cause seizures in patient with predisposing factors<sup>[1]</sup>. And there is no recorded adverse effect such as acute distension of the abdomen which was relieved by discontinuation of tramadol and when other supportive measures were given.

### **Case report**

A thirty five year old male having chronic cholecystitis secondary to chronic cholelithiasis underwent elective cholecystectomy under general anaesthesia. The patient had undergone all the routine investigations which were within normal limits. The surgical procedure and immediate post operative period was uneventful.

The patient had received one dose of injection cefotaxime sodium 2 gm i.v at the time of induction of anaesthesia and 50mg of injection tramadol intramuscular two doses in the post operative period.

The patient was noticed to have mild abdomen distension at around 10 pm, which was considered as paralytic ileus no active treatment was given.

In the following morning the general condition was stable but abdominal distension was more pronounced and tense but the bowel sounds were present. X-Ray of abdomen was done which showed only distended bowel but no air fluid levels or any gas under the diaphragm. Blood investigations were all within normal limits. Steps were taken for immediate abdominal decompression by inserting nasogastric tube, flatus tube and keeping the patient nil orally with intravenous fluid supplementation. As precautionary measure antibiotic and including tramadol was discontinued. Within 8-10 hrs the patient showed remarkable improvement and in 24 hrs the patient became normal and was discharged on the 4<sup>th</sup> post operative day with the caution not to use tramadol.

### **Discussion**

Tramadol is a centrally acting analgesic relieves pain by opioids mechanisms. Unlike other opioids it inhibits re-uptake of sodium and serotonin and thus activates monoaminergic spinal inhibition of pain. Tramadol causes less respiratory depression and is well tolerated. Hence it is used clinically and more frequently. Tramadol is indicated in mild to moderate pain during diagnostic procedures and post-operative analgesia. Normal dose is 50-100mg oral/ i.m / slow i.v given 4-6 hourly. Tramadol even in a single dose can cause severe adverse reaction. In one patient tramadol had caused ataxia, dilatation of pupil, tremulousness and dysphasia lasting for hours and disappearing after discontinuing therapy [2]. The most common gastrointestinal symptoms reported were with extended release tab and parenteral preparation of tramadol hydrochloride was nausea, vomiting, bleeding and post operative hemorrhage [3, 4]. In a drug information of oral tramadol has indicated adverse reaction with an incidence of <1.0% of Gastro-intestinal disorder as abdomen tenderness, abdomen distension, constipation, diverticulitis, gastro-esophageal reflux disease. When drug was administered to 2707 subjects in four randomized double blind studies treatment for 12weeks and two open labels long term studies treatment up to 12months in patient with moderate to severe pain [5].

### **Conclusion**

Tramadol has many adverse reactions and most of them are related to gastrointestinal system. Even a single dose can cause severe adverse reaction. To the best of our knowledge in literature search we have not found acute distension of the abdomen and stoppage of tramadol resulted in improvement as seen in our case.

### **References**

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