

CHAPTER VI

CONCLUSION AND RECOMMENDATION

6.1 Conclusion

Parecoxib sodium, at dose of 40 mg starting at Postanesthetic Care Unit and 12 hours later, was not effectively reduced morphine consumption in 24 hour postoperative period in total knee arthroplasty. Adverse effects of morphine in both groups were not statistically different. And adverse effects of parecoxib sodium were not found.

Since this study had not been carried out completely due to time limitation, sample size; therefore, were inadequate to conclude the results.

6.2 Recommendation

This study will be continued until completed the sample size. After that we will answer the primary research question. The suggestions for future studies are to use teaching programm about patient-controlled analgesia to subjects until they clearly understand how to use it before enrolling in the study. Consequently additional clinical studies, using different clinical designs or different patient populations, are needed to assess the comparative analgesia efficacy and opioid-sparing effects of parecoxib sodium, as well as their effects on clinically important outcome variables, such as blood loss, wound complications, and physical activities.