

and the catheterization was performed during the second coughing. Those in the spirometer group were asked to take a deep breath and let it out by blowing into a spirometer for 20 s, and catheterization was performed immediately after this. Those in the stress ball group were asked to squeeze and release the stress ball with the hand on the opposite side to that on which the catheterization would be performed, starting two minutes before the application and continuing until it was completed. Individuals in the control group were given only the standard peripheral intravenous catheterization procedure.

Results: The mean pain of the individuals in the coughing group was found to be 19.5 ± 13.6 , that of the spirometer group was 28.3 ± 20.2 , that of the stress ball group was 32.1 ± 23.8 , and that of the control group was 45.5 ± 19.5 .
Conclusion: It can be said that the coughing technique reduced the pain of peripheral intravenous catheterization more effectively than the other methods.

Obstetric Labor Pain

WIP16-0433 EFFECTS OF SUBARACHNOID BLOCK ON ALERTNESS OF PATIENTS DURING CAESAREAN SECTION

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Objective: To appraise the sedative effect of spinal bupivacaine in women undergoing caesarean delivery.

Methods: This was a prospective observational randomized clinical study carried out at the university of Nigeria teaching hospital Enugu and five other specialist hospitals in Enugu over a one-year period. One thousand five hundred (1500) women undergoing elective caesarean sections under subarachnoid block were observed for change in level of alertness over a 70-minute period. No premedication was given. The Modified Observer Alertness Assessment Scale (MOAA/S) and Visual Analogue Scale (VAS) were used to assess subjects before and after establishment the block.

The obtained data were entered in Prism 6 statistical software. Spearman's rank correlation coefficient was computed for the regression between the MOAA/S, and VAS over time. A p value 0.05 was considered significant.

Results: Patients' level of alertness was observed to have an average decline from a baseline 5 and 1 to 2.67 and 5.40 respectively on the MOAA/S and VAS. ($p = 0.045$) No patient had hypotension or hypoxia.

Conclusion: Spinal anaesthesia is associated with a significant reduction in level of alertness. Sedative requirements of patients will therefore be reduced.

WIP16-0087 EFFECT OF EXERCISE ON MENSTRUAL PAIN

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Objective: Sporting activity is changing the perception of pain during menstruation.

Methods: 40-year-old women who is menstruation pain level was 5 before exercise was affected daily activities, she went for 2 years to sport centre therefore her menstrual pain level was 3 after cardio exercise at week 3 day.

Results: According to research, menstrual pain in women who made on a regular exercise higher values threshold than sedentary women.

Conclusion: However, increasing trainingload, increasing the carbohydrate metabolism will lead to the accumulation of lactate and lactate nociceptors should be noted that warn.

Orofacial Pain

WIP16-0086 THE EFFECT OF THE APPLICATION OF VIBRATION TO INJECTION PAIN IN INVASIVE TREATMENT IN DENTAL TREATMENT

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Objective: Many dental patients experiences fear and anxiety concerning to pain resulting from injection of local anesthetics. Pain reduction mechanism of vibration can be explained by the gate-control theory Wall and Melzack's.

Methods: In researches were examined Patients ($n = 40$) admitted to the dentist for invasive, by vibration apply were recorded vas values.

Results: Vas values in patients who applying vibration lower than the other patients.

Conclusion: basviri et al found no difference between EMLA and lidocain in reducing ability to sense the pain of stimulus device the device was applied to gingival mucosanalgesia was found to be at a maximum in 13 to 14 min.

WIP16-0041 A CORRELATION BETWEEN STRESS AND OROFACIAL PAIN LEVEL IN ORAL SQUAMOUS CELL CARCINOMA PATIENTS

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Objective: The aim of the study was to determine the correlation between stress and pain level at the orofacial region in Oral Squamous Cell Carcinoma (OSCC) patients.

Methods: Thirty seven participants (aged 32-74 years old; 22 males, 15 females) that attended the outpatient clinic at the oncology ward, Hasan Sadikin General Hospital, Bandung, Indonesia that were diagnosed with a stage 2 to 4 of OSCC and have not commenced any treatment or consumed any analgesic drug were recruited in this study. The participants were interviewed by using the Thermometer Distress (DT) questionnaire to measure the level of stress and Visual Analogue Scale (VAS) questionnaire to measure the level of orofacial pain experienced at the time of the interview. The data were then analyzed by the Spearman correlation test.

Results: The result revealed that stress has a significant ($p < 0.01$) and strong correlation ($r = 0.83$) with orofacial pain level in OSCC patients. It was also revealed that there was a positive relationship between these two variables, which means, when the level of stress increases, it is more likely that the patient will experience more pain at their orofacial area.

Conclusion: The current study concluded that there is a very strong correlation between stress and orofacial pain level in OSCC patients. Nevertheless, further studies in this area are needed.