



# Efficacy of Preoperative Administration of Acetaminophen and Melatonin on Retrobulbar Block Associated Pain in Cataract Surgery: A Letter to Editor

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## Dear Editor,

I read the paper entitled “efficacy of preoperative administration of acetaminophen and melatonin on retrobulbar block associated pain in cataract surgery” in your valuable journal (1). Actually, the preemptive analgesic effect of melatonin is well established (2-6). Therefore, pain score reduction during a retrobulbar block by the preventive use of melatonin is self-explaining. On the other hand, cataract surgery patients are old enough to be more sensitive to the sedative effects of melatonin (7). In general, cataract surgeries are performed under MAC (monitored anesthesia care) or light intravenous sedation with the aim of rapid recovery and early discharge of the patients. The use of short-acting sedative drugs for this purpose is highly recommended. Up to eight hours after the ingestion of a usual dose of oral melatonin, its concentration exceeds the basal rates (8). Then, by the use of melatonin as a preemptive analgesic drug in short-time surgeries such as cataract surgery (that is usually performed by Phacoemulsification) in elderly patients, the prolonged recovery and delayed discharge are inevitable and this method will not be very fortunate in routine daily practice, especially in daycare surgery centers with high enough daily turnover. It is prudent to think more about a proper anesthesia regimen for elderly patients in outpatient settings.

## Footnotes

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