

## **Auricular Nerve Stimulation using the NSS-2 BRIDGE® device to reduce opioid requirement following laparoscopic Roux-en-Y gastric bypass**

Bestoun H. Ahmed, Anita P. Courcoulas, Amy L. Monroe, William Gourash, Jacques E. Chelly, Surgery for Obesity and Related Diseases, 2021. Pre-Print.

### **Background**

Evidence supports the use of complementary techniques to reduce pain and opioid use after surgery. NSS-2 BRIDGE® device (NBD®) modulates pain via the stimulation of nucleus of the auricular branch of the cranial nerves at the level of the brainstem and the limbic system.

### **Objectives**

Investigate the role of auricular nerve field stimulation for pain control following gastric bypass surgery

### **Settings**

Academic medical center, USA

### **Methods**

A total of 18 subjects were included. Subjects were divided in 2 groups: NBD® group (n=8) and a control group (n=10). The NBD® was placed following LRYGB in the recovery room. The effectiveness of NBD® was assessed comparing the relative use of opioid consumption (oral morphine equivalent = OME), and pain (0 = no pain to 10= worst possible pain) at 24 hr. and 48 hr. post-surgery. In addition, the device tolerability ([1], [2], [3], [4], [5], [6], [7], [8], [9], [10]) was assessed with, 8-10 considered excellent. Data was analyzed using unpaired t-test and presented as mean ± Standard Deviation (SD). Alpha was set up at 0.1.

### **Results**

Compared to the control group, the use of NBD® was associated with a 60.2% reduction in OME (38.15 mg vs 15.2 mg;  $p < 0.1$ ) and a 28% reduction in pain (5.0 vs 3.6;  $p = 0.1$ ) at 24 hr. post-surgery. The tolerability of NBD® was reported to be excellent.

### **Conclusions**

This report suggests that NBD® may represent an interesting alternative to control perioperative pain and limit opioids use following bariatric surgery. This need to be confirmed by a placebo control randomized study.