



Longitudinal Trends in Prehospital Analgesia

From Morphine-Centric Protocols to Multi-Modal Implementation (2006-2025)

MHSRS 2026

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Disclosures

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The statements and opinions published in this abstract are solely those of the abstract authors and not of the Israel Defense Forces (IDF). This study was performed as part of the IDF Trauma and Combat Medicine Branch's efforts to improve the quality of combat casualty care and received no external funding or support. All authors had access to the data utilized in this study.



The Rationale: Addressing the "Pain Management Gap"

The Clinical Need



Prehospital pain management at the Point of Injury (POI) is essential for casualty care, but has been historically underutilized.

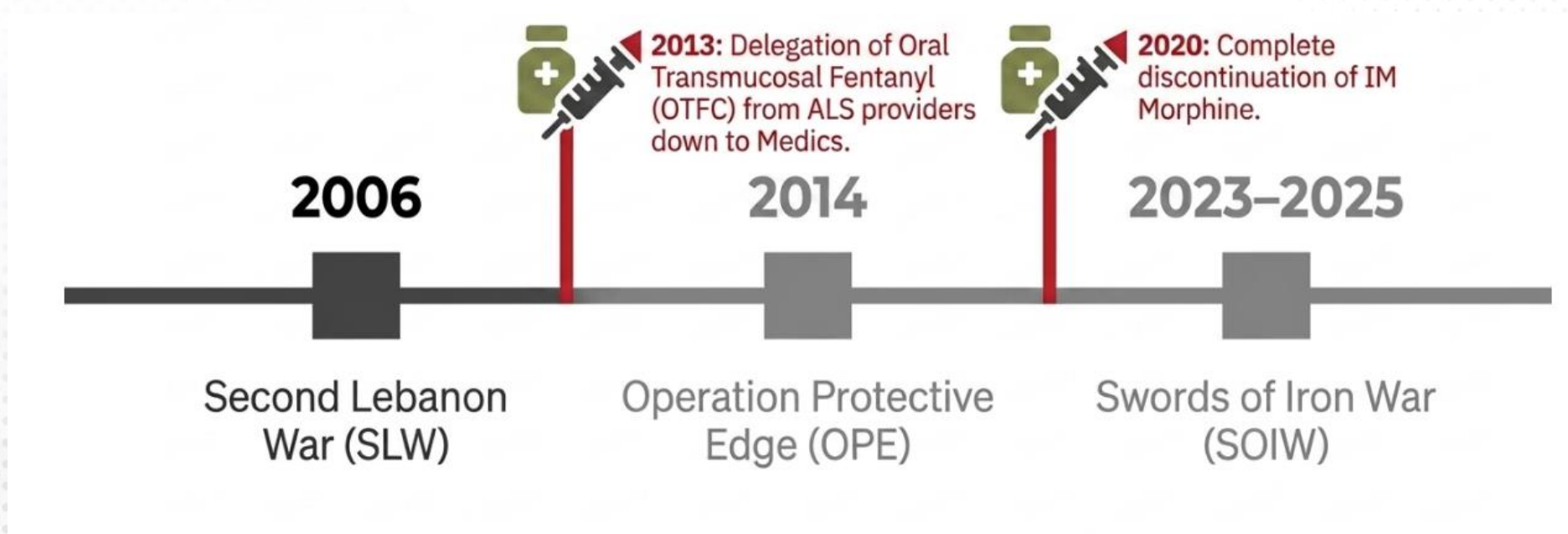
Tactical Constraints



Over the last two decades, the IDF-MC has transitioned from morphine-centric protocols to a **diversified multi-modal strategy**.



Two critical Protocol shifts catalyzed the evolution of battlefield care



Methodology –A Longitudinal Perspective

- **Data Source:** Retrospective longitudinal analysis based on the **IDF Trauma Registry**.
- **Study Population:** All recorded casualties during three major combat periods:
 - **SLW (2006):** Second Lebanon War.
 - **OPE (2014):** Operation Protective Edge.
 - **SOIW (2023-2025):** Swords of Iron War.
- **Focus of Analysis:** Potent prehospital analgesia administration at the Point of Injury (POI).
- **Agents Evaluated:**
 - **OTFC (Actiq):** Oral Transmucosal Fentanyl Citrate.
 - **Ketamine:** Intravenous (IV).
 - **Morphine:** Intravenous (IV) and Intramuscular (IM).



Results

Increased
analgesic
treatment
rate

Decentralized
access to
analgetic
treatment

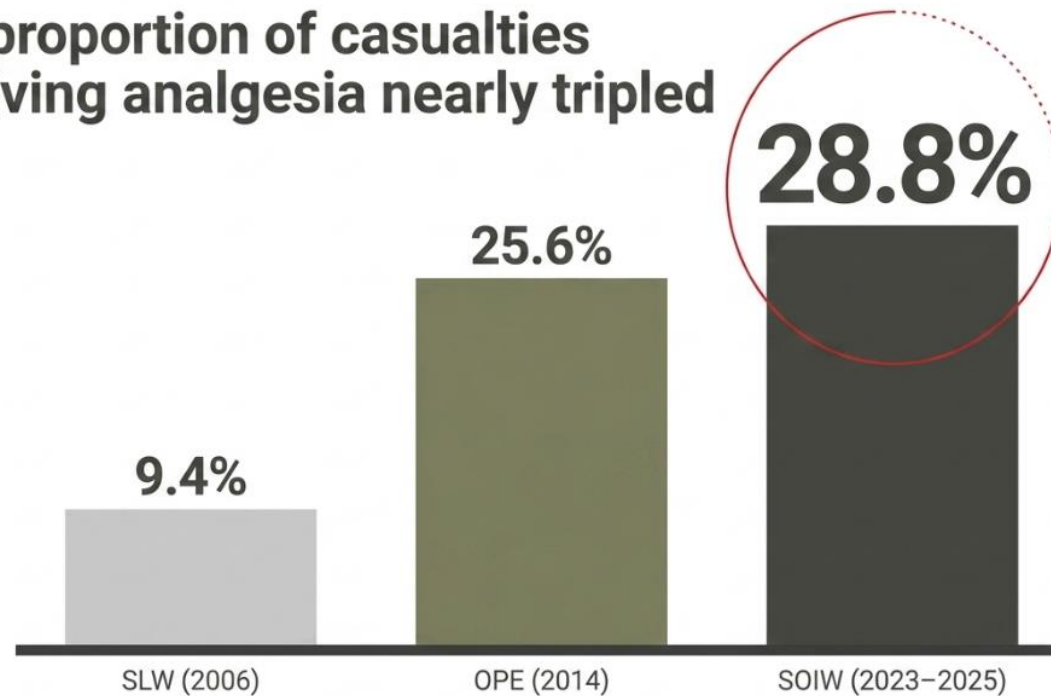
Shift to more
hemodynamically
stable drugs in
combat trauma



Tripling the Analgesia Treatment Rate

35

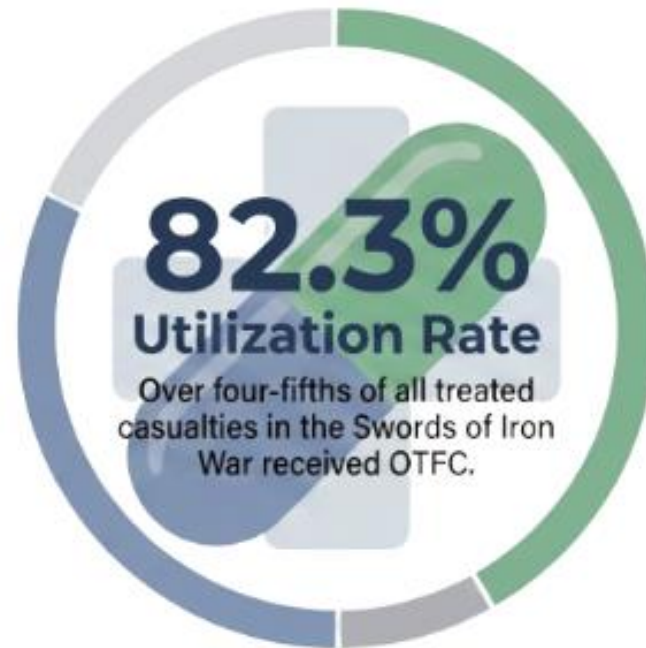
The proportion of casualties receiving analgesia nearly tripled



Key Takeaway: This trend demonstrates a significant expansion in clinical reach and the successful implementation of protocols under high-intensity combat constraint



The OTFC (Actiq) Revolution & Task Shifting



Multi-Modal Breakdown of OTFC Administration



64.8%
Standalone Agent

The majority of OTFC recipients were managed with the single agent for effective pain control.



29.1%
Multi-Modal Combination

Nearly one-third of recipients received OTFC in combination with

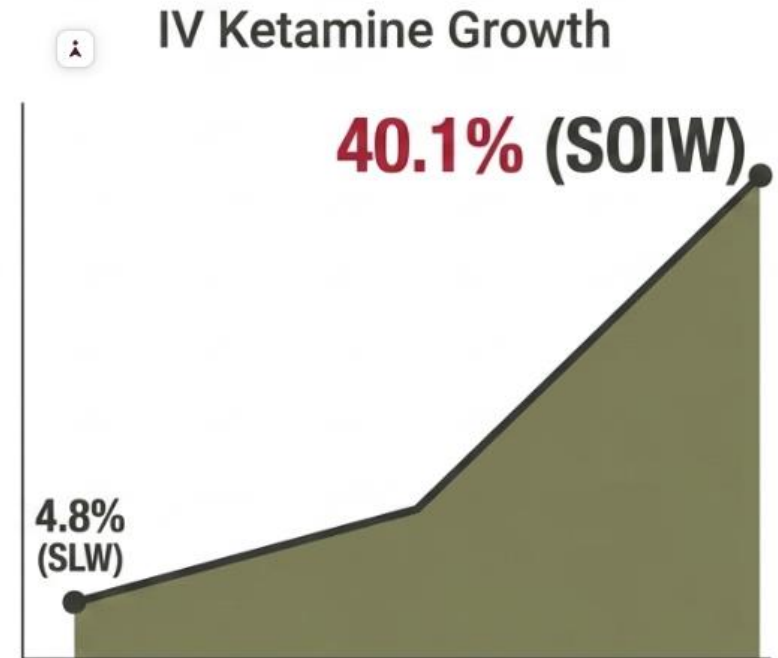
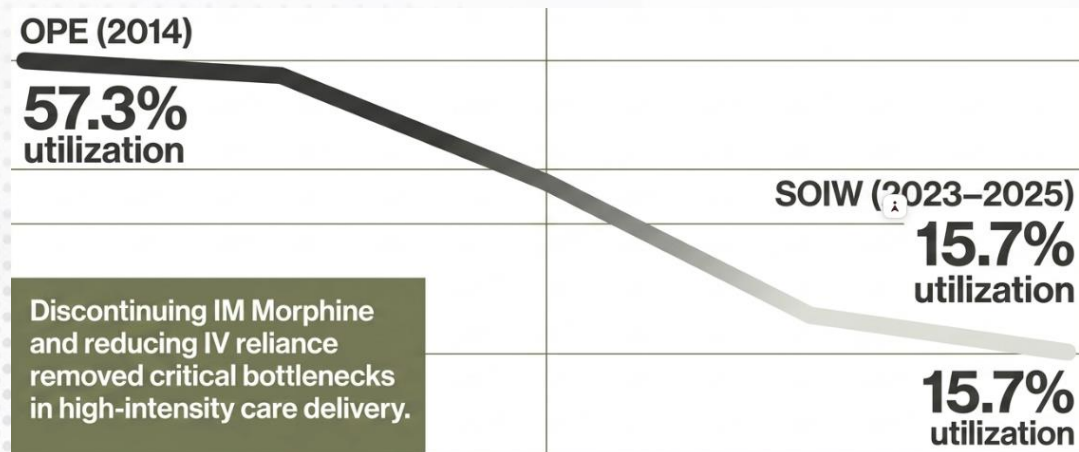


6.1%
Other Combinations



Changing the Standard: The Rise of Ketamine and Decline of Morphine

- IV Morphine use dropped from 57.3% in 2014 (OPE) to 15.7% in SOIW
- **2020 Milestone:** Intramuscular (IM) Morphine was completely discontinued from IDF protocols.





Limitations and Future Directions

- **Retrospective Design**
- **Documentation Gaps**
 - Insufficient recording of **pain scores** (NRS) during the prehospital phase.
 - Potential under-reporting of analgesia administration under intense tactical constraints.
- **Process vs. Outcome**
 - This study measures **treatment penetration** rather than **clinical efficacy**
 - Further research is needed to correlate increased analgesia rate with long-term clinical outcome and casualty satisfaction.





THANK YOU



At the moment of truth,
IDF MEDICAL CORPS.

