Abstract Transversus abdominis plane (TAP) block is an alternative to spinal morphine for analgesia after Caesarean section but there are few data on its comparative efficacy.Therefore, we performed a prospective study to compare the relative analgesic efficacy of TAP block with local anesthetic to spinal morphine after Caesarean section [7] .The transversus abdominis plane (TAP) block is a regional analgesic technique which blocks T6–L1 nerve branches and has an evolving role in postoperative analgesia for lower abdominal surgeries.6–8 It is a simple and safe technique and is a potential alterative to spinal opioid for analgesia after Caesarean section, whether guided by traditional anatomic landmarks or by ultrasound [5].But whether administered systemically or via the spinal nerve, opioids are often linked to side effects like drowsiness, nausea, and sometimes even respiratory depression.It has been recommended recently that patients 4 should be monitored extensively to detect respiratory depression5 after receiving hydrophilic opioids via the spinal route [4] .Pain scores and analgesia requirements were lowest in those receiving spinal morphine 100 mg. Bilateral TAP blocks using bupivacaine 2 mg kg21had no extra analgesic effect.The delivery by caesarean section is among the most often carried out surgical operations.Eighty patients were randomized to one of four groups to receive (in addition to spinal anaesthesia) either spinal morphine 100 ug (S(M)) or saline (S(S)) and a postoperative bilateral TAP block with either bupivacaine (T(LA)) 2 mg kg(−1) or saline (T(S)).The rank order of median pain scores on movement at 6 h was: S(M)T(LA) (20 mm)

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