

AB096. SOH22ABS082. Ultrasound guided neurolytic coeliac plexus block (CPB): a case report

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Background: The coeliac plexus is the main junction for autonomic nerves supplying the upper abdomen and as such it is a target for the administration of regional anaesthesia with the aim of controlling visceral pain in upper abdominal cancers. An example would be its use in pain associated with pancreatic cancer. A neurolytic agent may be used to cause an irreversible conduction block at the nerve site and prolong the therapeutic effect of the block. Using a posterior approach with neurolytic therapy risks unintended neural injury. In this case report I will describe the successful performance of a neurolytic CPB under ultrasound guidance using an anterior approach.

Methods: A 58-year-old man with intractable abdominal pain secondary to advanced metastatic pancreatic cancer was referred to the Pain Service at UHL for consideration of a CPB for which he was deemed suitable. Informed consent, standard monitoring, intravenous access and an aseptic technique were observed. An anterior approach under ultrasound guidance was used, the needle was placed in the pre-aortic area near the origin of the coeliac trunk and a mixture of 10 mL of 0.5% levobupivacaine and 10 mL of 100% ethanol were injected.

Results: No complications were reported following the

procedure. CH reported a significant decrease in pain starting from two hours post-procedure. Follow-up by phone call two weeks later revealed ongoing pain relief and patient satisfaction.

Conclusions: In skilled hands, an ultrasound guided CPB is a safe, straight-forward and effective method of delivery of palliative analgesia in pancreatic cancer.

Keywords: Analgesia; coeliac plexus block (CPB); pain; palliative; ultrasound

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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