

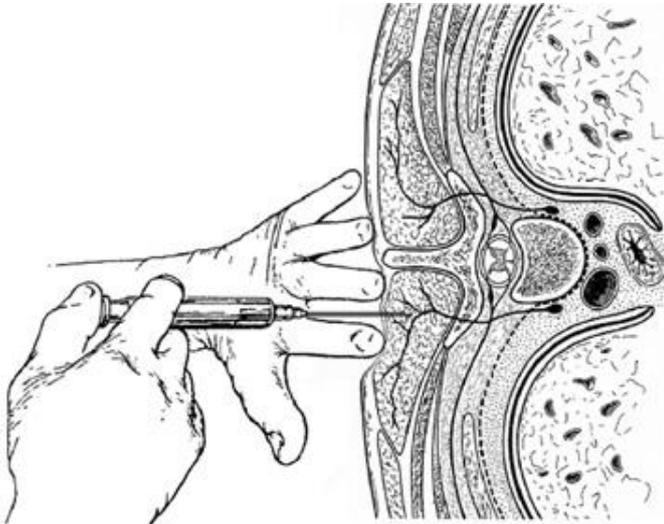
Thoracic Paravertebral Block for Post-operative Pain Relief: What should you know?

Introduction

This leaflet aims to provide you the basic information about the thoracic paravertebral block that you are going to receive. If you have any questions please discuss with your anaesthetist who will be willing to answer your questions.

What is a paravertebral block?

Thoracic paravertebral block means the injection of local anaesthetic into the space adjacent to the thoracic vertebra, where the spinal nerves exit from the spinal cord. The block will provide anaesthesia and pain relief for the corresponding area of the chest wall.



Are there any conditions that make me not suitable for thoracic paravertebral block?

Your anaesthetist will determine whether you are suitable for thoracic paravertebral block after assessing your medical conditions and the nature of your operation. Some

conditions may make you unsuitable for thoracic paravertebral block:

- If you refuse
- If you have bleeding disorder: ease of bruising/prolonged bleeding
- If you receive medications to 'thin' your blood or prevent clotting
- If you have infection around the proposed injection site on the chest wall

General information about the thoracic paravertebral block

- Your block will be performed by your anaesthetist. He/she will do a pre-anaesthetic assessment before the procedure, including brief history taking, medical examination and review your investigation results. He/she will also discuss with you on the risks and benefits of your procedure and sign the consent form with you.
- Fasting: you should fast at least 6 hours before your operation. You can safely drink water until 2 hours before the operation.
- You are allowed to take your usual medications (as instructed by your anaesthetist) with sips of water while you are fasting.
- If you feel unwell of the day of your operation, you should inform the hospital and your operation may need to be postponed.

How is the thoracic paravertebral block performed?

- Vital sign monitors will be attached to you before the procedure.
- Your anaesthetist will insert an angio-catheter into your vein and attach it to a running drip.
- Your block may be done awake, after sedation or general anaesthesia.
- You may lie on your side or sit up while your anaesthetist performs the block.
- The block will be done under sterile technique, local anaesthetic will be injected into your paravertebral space and a catheter may be inserted into the space.
- Your anaesthetist will stay with you at all times during the operation, monitor your vital signs, give you treatment as necessary and ensure your safety.

Post-operative pain relief

The duration of pain relief offered by the block depends on the choices of local

anaesthetics. Pain relief may be extended by continuous infusion of local anaesthetic into the catheter inserted. Your anaesthetist will discuss with you on different choices.

Is there any risk of thoracic paravertebral block?

The side effects and complications associated with this technique can be divided into those that are very common and common, rare or very rare*.

Very common and common side effects	Rare or very rare complications
Infection	Pneumothorax
Bleeding	Cardiac arrest
Failure of pain relief	Nerve damage
	Local anaesthetic toxicity
	Local anaesthetic allergy
	Hypotension
	Puncture of dural sac
	Transient drooping of eye lid on same side
	Numbness sensation of arm on same side

Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your anaesthetist.

Complications may sometimes occur despite all precautions. However, if they do occur, your anaesthetist will take appropriate steps to manage them.

*Reference of occurrence rate

Very common	Common	Uncommon	Rare	Very rare
1 in 10	1 in 100	1 in 1000	1 in 10,000	1 in 100,000