BILATERAL SINGLE-SHOT QUADRATUS LUMBORUM BLOCK FOR POST-OPERATIVE PAIN RELIEF IN A BREASTFEEDING WOMAN

Luísa Ferreira¹, Pedro Cunha¹, Raquel Oliveira¹, Carlos Almeida², José Pedro Assunção³
1- Anesthesiology residents; 2- Anesthesiologist; 3- Dir. of Anesthesiology Department of
Centro Hospitalar Tondela-Viseu, CHTV

INTRODUCTION

Post-laparotomy pain is often difficult to control, and intravenous analgesia must be careful in breastfeeding women. Bilateral single-shot quadratus lumborum block (QLB) produces sensitive block from T6-L2 which promotes visceral and somatic pain relief for an extended period, diminishing the need of a continuous technique.

CASE REPORT

Breastfeeding woman, 39, ASA I, with fever and leukocytosis, PCR 15,99 mg/dL. Exploratory laparotomy was performed by dehiscence of the uterine anastomosis, 6 days after cesarean section. A general anesthesia was performed, with multimodal analgesia in the intraoperative period. A bilateral QLB was performed with ropivacaine 0.375%, 20 ml each side, ultrasound guided at the of end the surgery. The patient reported pain EN 0/10, without requirement of additional analgesic therapy at the PACU. Paracetamol 1g 3 tid was added to the analgesic regimen. Patient reported pain EN 2/10 up to 36h post-operatively.

DISCUSSION

Pain control after laparotomy with intravenous analgesia is difficult without the use of large doses of opioids. Effective pain management is of great importance in a puerperal patient with the need for breastfeeding of the newborn. The possibility of bacteremia is a relative contra-indication for epidural catheterization. In this case report, the bilateral single-shot QLB has been shown to be effective in pain control without the need for IV opioids or epidural catheterization.

Contact

Pedro Armindo Machado Cunha
Centro Hospitalar Tondela-Viseu
Email: mindo111.pc@gmail.com
Phone: 913372355