PECS II block as primary anaesthesia for breast conservative surgery

Girish Tumkur Nagendra, Henryk Lukaszek, Subhamay Ghosh
Prince Philip Hospital
Wales, UK

Background: Pectoral blocks have been popularly used for peri-operative analgesia in breast surgery. We used PECS II block with sedation as a sole anaesthetic for an elderly, high risk anaesthesia patient with retrosternal goitre.

Case Report:

A 79 year-old-lady was diagnosed with ductal carcinoma-in-situ of her left breast with ultrasound and mammography guided core biopsy and was planned for wide local excision of tumor. Patient history revealed a retrosternal goitre for which she had received radioiodine therapy and had shrunk to a palpable thyroid 4cm * 6cm. Chest X-ray revealed clear deviation of trachea to the left and possible narrowing. A previous CT scan had revealed significant deviation of trachea indenting on the carina. Following risk assessment and detailed discussions with a multidisciplinary team, it was agreed that the operation would be performed under a regional block with sedation. The patient was informed about the decision and consented to procedures.

The patient was premedicated, then standard anaesthetic monitoring followed with iv access. Under asepsis, ultrasound guided PECS II block was administered with 1% lignocaine to skin and then used 0.25% levo-bupivacaine, first 10ml between pectoralis major and minor followed by 20ml between pectoralis minor and serratus anterior. Intra-operatively, patient received additional titrated doses of midazolam and fentanyl. The lesion was excised and histologically confirmed the diagnosis. Patient's cardiorespiratory parameters remained stable and she was comfortable.

Learning points:

We demonstrated that PECS II block can be used as primary anaesthesia in a patient in whom general anaesthesia is of high risk with minimal risk of complications².

During the post-operative period, the patient's condition remained unchanged without an increased demand for analgesia. Patient feedback was very good.

Discussion:

PECS II block can provide good peri-operative analgesia as a part of multimodal strategy¹. Besides breast surgery, PECS II block has proved to be very helpful low risk intervention in many different procedures like clavicle operations, minimally invasive cardiac surgeries and cardiac synchronization therapy device implantation.

References:

1. Pectoral Nerves 1 and 2 blocks in multimodal analgesia for breast cancer surgery. (Reg Anesth Pain Med 2015;40: 68-74)
2. Ultrasound guided pectoral nerves block(PECS): complications observed in 498 consecutive cases. (Journal of Clinical Anesthesia 42 (2017) 46)