SERRATUS-INTERCOSTAL BLOCK IN PATIENTS UNDERGOING LAPAROSCOPIC SURGERY FOR PHEOCHROMOCYTOMA

M. Pérez Herrero. Hospital Clínico Universitario de Valladolid, Spain.

Introduction

Regional anesthesia is associated with decreased risk of complications after major surgery, but central blocks effects remain controversial in pheochromocytoma.

Objetives:

- To describe perioperative behavior in pheochromocytoma patients who were operated under general anaesthesia and serratus-intercostal block.
- To compare with general anaesthesia patients.

Material & Methods

Retrospective study in 4 patients (3 women and 1 man), 40 +/- 2,3 aged, who underwent laparoscopic surgery for pheochromocytoma in general anesthesia associated with serratus intercostal block. After invasive monitorization, every patient was induced and maintained as usual and intubated, we performed the block in supine position patient. We placed the linear high frequency (8-15 Hz) probe in axillar ipsilateral midline as the figure, we inserted the needle between serratus and external intercostal muscles at 8-9th level to deposite Ropivacaine 1% 15 cc. We registered surgery duration, overall number and duration (minutes) of hypertensive emergencies and arrytmias. One patient sufered a cardiac arrest, but she was the oldest one and the biggest tumour (2,4 kilogrames). And she was reanimated with chest massage and adrenalina perfusion without complications. We also recorded pain intensity (EVN) in three moments: before surgery, 2h hours after surgery, 1 and 3 months later.

Result(s)

Postoperative pain was 3 (SD-1,46) in immediate postoperative period, 4 (SD- 2,4) and 0 one month later. Overall mean number of hypertensive intraoperative emergencies was 4.41 (SD-2.45). No other complications. No differences in pain control in control group.

	imc	Surgical time (min)	Hypertensives emergencies	EVN	complications
1	2,1	150	3	0	0
2	1,5	90	1	0	0
3	2	95	0	1	1 (nausea)
4	2,6	110	2	0	0

Conclusion(s)

Serratus-intercostal block is a useful analgesic technique to perform laparoscopic surgery to pheochromocytoma in our serie. There was higher pain intensity EVN levels one week after surgery than the other moments we measured.

References

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