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Role of ankle block in the foot surgery.

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INTRODUCTION

This prospective observational study examines the role of ankle block in foot operations.

OBJECTIVES

We want evaluate the efficacy of ankle block in this kind foot’s surgery. Patients walk soon after surgery time and we have evaluated pain at rest and on movement. Still we have considered the adverse events: nausea, vomiting, hematoma in site of block, prolonged motor block, nerve injury, local anesthetics toxicity, ,local infections.

METHOD

We enrolled 212 patients, ASA I-III. We measured onset/offset time of block, pre-, intra-, and post-operative hemodynamic parameters (heart rate and blood pressure), total operation duration, the degree of sedation, post-operative pain severity through visual analogical scale (VAS) at 6-12-24 h and 1 month after operation, the need for rescue analgesia and any complications/side effects.

RESULTS

There were no statistically significant differences in the measures pre-, intra-, and post-operative of blood pressure, and heart rate (variation < 30%, p=0.12 and p=0.39). VAS at rest < 3 in 94% of patients was attained in the worst time at 12h after surgery (graph 1). Also VAS on movement (walking test 30 meters) < 3 in 93 % (Graph 2). 14% of patients suffered nausea and vomiting and 4% suffered gastric pain; no other side effects were found (Graph 3). The patients were discharged within 24h.

VAS at rest (Graph 1)

VAS on movement (Graph 2)

Adverse events (Graph 3)

CONCLUSIONS

Ankle block was effective for percutaneous surgery of foot and for the management of pain post-operative and the adverse events were limited. Also the ankle block allows early deambulation of patients.

In conclusion, for this kind of foot surgery, the ankle block we considered a optimal tecnique in cosideration of the best patient outcome.

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