An alternative approach to spinal anaesthesia complications

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Background:

Although spinal anaesthesia complications are quite rare at this time, they are severe and present a challenge for every physician. They are related to the technique itself or to the substances being administered during the anaesthesia. Sometimes, the standard treatment for these complications is ineffective, therefore the physician is compelled to try alternative solutions to the problem. Practice concerning complementary and alternative medicine is currently an area of considerable interest.

Case report:

A 40 year old female was admitted for a right ankle fracture. The patient underwent open reduction and internal fixation of right ankle fracture under spinal anesthesia with 0.5 % 12 mg plain bupivacaine, at L2-L3 intervertebral space, using pencil point 25 – gauge needle, with the patient in sitting position. Forty-eight hours later, a sudden onset of severe headache, nausea and vomiting was noted. The patient was advised to bed rest, iv and oral fluids, analgesia as per protocol and oral caffeine sodium benzoate. The symptoms persisted, therefore the patient was given a phytotherapeutic drug composed of *Zingiber officinale* (30 mg) and *Salvia officinalis* (20 mg), tablets which were administered sublingual, six tablets per day for two days, with the patient's consent.

Discussions:

Twenty-four hours after the phytotherapeutic drug was administered, the symptoms disappeared. Post dural puncture headache mechanism is not fully understood. Ginger is reported in Ayurvedic system of medicine to be useful in neurological disorders; it has been shown to exert potent antiemetic properties, but its precise mode of action has not yet been elucidated (either by an antagonist effect on 5 HT-3 receptors, an antagonist effect over serotonin receptors, or an anticholinergic or antihistaminic effect). Extracts of the spice ginger (*Zingiber officinale* Roscoe) are rich in gingerols and shogaols, which exhibit antioxidant, anti-inflammatory and other properties.

Learning points:

Spinal anaesthesia complication approach can come from various perspectives. There are no known side effects for the phytotherapeutic medication, other than allergic reactions to the plants themselves, therefore the study of such an alternative can be extended to a cohort type study. The treatment can be an alternative to the classic treatment when there are contraindications for the latter. Informed consent was obtained from the presented patient.