

Don't Always Blame the Block

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While regional anesthetics are often blamed for various complications, it is important to note that many of these complications can occur regardless of the administration of regional anesthetics



Complication



Evidence



Risk Factors

01



Post-Operative Urinary Retention (POUR)

There was no significant difference in POUR rates between patient-controlled analgesia and spinal anaesthesia. (1)

age, sex, comorbidities (e.g diabetes) and surgery type (8)

02



Delayed Diagnosis of Compartment Syndrome

Lower concentration local anesthetic nerve blocks, without adjuncts, do not cause diagnostic delays if surveillance is effective. (2)

male gender, long bone fractures, coagulopathies (9)

03

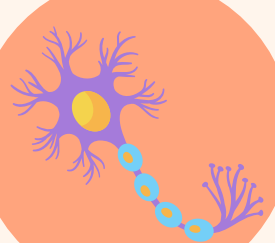


Postpartum Back Pain

There is no correlation between postpartum back pain and the type of anesthesia. (3)

pre-pregnancy back pain, depression & heavy workload during pregnancy, high BMI (10)

04



Nerve Injury

Incidence of permanent neurological symptoms postoperative after peripheral nerve block is estimated 1/5000 (4) vs 1/1000 after general anaesthesia. (5)

type of surgery, prolong tourniquet time, co-morbidities (e.g diabetes), male gender, elderly, positioning during surgery (11)

05



Falls due to muscle weakness

- Single shot lumbar plexus block (including femoral nerve) does NOT significantly increase fall risk in major orthopaedic surgery patients.(6)
- Tourniquet use in total knee replacement reduces quadriceps function for the initial 6 months after surgery (7).

older age, lower limb operation, medications, history of falls (12)

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