

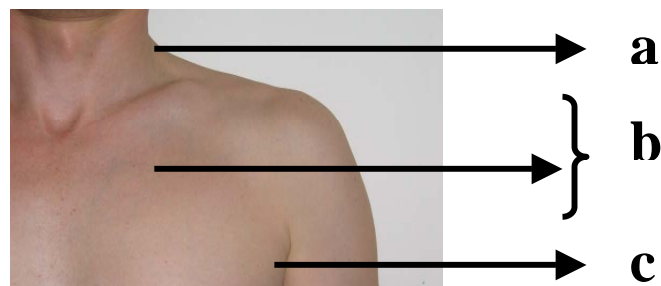
Patient information leaflet for brachial plexus blockade

What is your brachial plexus?

This is the name given to the bundle of nerves that supply your shoulder, arm and hand with feeling and power. These nerves start in the neck and travel via the armpit, eventually reaching the hand.

Why am I having a brachial plexus block?

Your anaesthetist may suggest this for surgery to the shoulder, arm or hand. By placing an injection of local anaesthetic near these nerves as they travel down the side of the neck (**a**), around the collar bone (**b**), or in the armpit (**c**), it is possible to temporarily block feeling and power to the shoulder, arm and hand.



Benefits

Your anaesthetist may suggest performing such a “block” for a number of reasons

To avoid the risks of a general anaesthetic

By blocking the feeling to your arm it may be possible to have your operation performed with you awake and pain free. This may be particularly important if you have heart or breathing problems.

For pain relief after your operation

The block can be given as well as a general anaesthetic. This reduces the need for strong pain killers after your surgery, which can make you feel sick and drowsy. It can also help the physiotherapists to start moving the area, which aids recovery.

To increase blood flow to the area

By blocking the nerve supply, this increases blood flow to the area. In certain situations, this may be hugely beneficial. An increase in blood flow means that more oxygen and nutrients reach the tissues, which may speed their recovery.

How will the procedure be performed?

You will be starved as for a general anaesthetic. When you arrive in theatre we will monitor your heart rate, blood pressure and breathing and place a small tube (drip) in the back of your hand. The block can be performed with you awake, sedated or asleep. Using a small needle* we place local anaesthetic around the nerves, at positions a, b or c, see picture above. Initially your arm will feel warm and tingly. Within 40 minutes, it will become numb and heavy. (*Your anaesthetist may use a special needle with a small electric current running through it to help find the correct nerves. This will make your arm twitch which is a strange feeling although not usually painful. An ultrasound machine may also be used.)

Occasionally your anaesthetist may suggest placing a catheter (a very thin tube) through the needle at the same time. This allows more local anaesthetic to be given later-perhaps for up to a few days after your operation.

Recovery

The effects of the local anaesthetic will last on average 10 hours. (Range 4-24 hours.) Until the power has returned to your arm it will be held in a sling. Ensure that the power and feeling has fully returned to the arm before using it.

Potential risks

All human activities carry an element of risk. 1 in 15 000 of us will die on the UK roads every year. Remember, your anaesthetist may be suggesting performing this block to spare you the risks of a general anaesthetic. These procedures are routine and are performed with maximum regard for your safety.

Allergy is extremely unlikely, you are more likely to have allergy to the drugs used for a general anaesthetic.

Toxicity is unlikely as the local anaesthetic dosage is carefully calculated according to your weight.

If the injection is placed in the side of your neck, see a) on the picture above, there are certain expected side effects including hoarse voice, droopy upper eyelid and feeling faint, all of which are short lived.

Permanent damage to the nerves is very rare. More common side effects are tingling and numbness in the area, this usually resolves within 3 months. Irrespective of where the injection is made, there is a small risk of damage to the blood vessels in the area. Very rare risks include damage to the lung, fits and other life threatening events.

If you have any questions please do not hesitate to ask your anaesthetist or other patients on the ward who may well have already had this procedure.