

Regional anaesthesia update

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We explore the relevant regional anaesthesia updates in the past few years, and discuss what I hope to be clinically relevant studies and updates. We will travel around the body from head to toe and give large-picture global updates. My aim is that this talk will have something interesting for everyone – from the block masters to those that don't utilise regional anaesthesia in their day-to-day practice.

Here are the following questions that we aim to answer during the update. Come along and join the discussion to find the latest answers to the following questions...

Upper limb:

- How common is rebound pain?¹
- Who is at most risk of reporting rebound pain?²
- What is the satisfaction rate of patient's having blocks, and should you consider this for your next upper peripheral limb surgery?
- How long does dexmedetomidine additive actually "add" to the duration of the block? One day? Two days? And what time frame would you expect the rebound pain to occur?³
- What percentage of patients receiving an interscalene block require HFNP or other forms of respiratory support and what preoperative patient factors determine the highest risk? Should you proceed blocking with this patient without a HDU bed?⁴
- In patients that have a documented nerve injury, would you consider a peripheral nerve block? Or is the double-whammy injury a real thing?⁵

Hips and knees:

- What updates are there with the PENG (pericapsular nerve group block) and is there evidence to support their routine use?⁶
- GA vs Regional Anaesthesia: an age-old debate that has recently come to light again
 - We will explore a couple of gold-standard large meta-analysis as well as discussing the two studies that reignited the debate – REGAIN and RAGA trials.⁷
 - Do anaesthetists affect patient outcomes? and if so – by how much?⁸
 - What insights does the ANZ Hip Fracture database reveal?⁹
 - ICAROS group meta-analysis on regional vs general anaesthesia for hip arthroplasty and total knee arthroplasty (TKA) and what do they conclude?^{10,11}

Neuraxial anaesthesia / regional anaesthesia for spines

- Does the use of ultrasound improve success when placing a lumbar or thoracic epidural?¹²
- Is there role for regional anaesthesia in spine surgery?
- What does the evolving literature reveal about erector spinae blocks in lumbar spine surgery?¹³

Knees and ankles:

- Are peripheral nerve blocks for ankle fracture surgery useful? And does it add anything to a spinal?¹⁴
- Where is the optimum placement of an adductor canal catheter (ACC) for TKA?¹⁵
- What is the best way to secure a catheter to minimise migration? What is the failure rate of ACCs?¹⁶
- Should we be considering ACC for our TKA patients?¹⁷

Truncal trauma

- What role does Acute Pain Service play in looking after patients with blunt force trauma of the chest?¹⁸
- Does their involvement change patient outcomes?
- What does the local data (Middlemore) show after the implementation of the COMBAT protocol for rib fractures?

Interesting but less used blocks...

- We will discuss the use and application of the clavipectoral fascial block for midshaft clavicle fracture surgery.
- What are the benefits of this block vs tried-and-true Interscalene block?¹⁹

Finally, adjuncts...

- We explore the latest network meta-analysis looking at how various additives for regional anaesthesia affect the mean duration of action.
- What additives are used around the world? What can you use to prolong your block successfully?²⁰

I hope you can join me in this upcoming meeting to discuss, debate and answer some of these questions!

Resources

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