Information sheet for adult patients undergoing:

Coeliac plexus block

for the Treatment of Pain

What is the aim of this information sheet?

The aim of this information sheet is to provide you with information relating to coeliac plexus blocks and to answer some questions that you may have. Please note that practice may vary. Your doctor will be able to explain more about what to expect.

What is a coeliac plexus block?

A coeliac plexus block is an injection used to treat certain types of abdominal pain, often pain that has proved difficult to treat by other methods. Your doctor can give you further information about the injection and what is to be injected. The injection may be made with local anaesthetic. Most commonly it is undertaken for cancer pain using a substance to destroy nerves in the coeliac plexus using either phenol or alcohol. Careful consideration of the potential benefits and the risks is required to ensure that this is the right treatment for you.
Is this the right treatment for me?

Other treatment options will be discussed with you before deciding to go ahead with the injection and your consent is needed. The decision on whether or not to go ahead with the injection is a shared decision between you and your doctor. Your doctor will be able to provide you with up-to-date information about the likelihood of this being a successful treatment for you. If you are undecided about whether or not to have an injection then further advice and information to make this informed decision can be provided. Please speak to your doctor for more information.

If your health has changed, it is important to let your doctor know;

- If you have an infection in your body or on the skin of your back, your doctor will postpone the treatment until the infection is cleared
- If you have been started on anticoagulant or antiplatelet medicines that “thin the blood” such as warfarin, heparin or clopidogrel, this may require extra preparation
- If you have any allergies

You must also inform the doctor if there is any chance that you could be pregnant.

Finally, if you are planning to travel abroad or fly within two weeks after the injection, please let your doctor know as it may be best to change the date of the injection.

What will happen to me during the treatment?

Before the injection, your doctor will discuss the procedure with you. Your doctor will either obtain your consent before the injection or confirm this consent if it was previously given. The treatment will take place in a dedicated area with trained personnel. An X-ray machine (or other forms of image guidance) will be used to enable accurate injection. Not all doctors undertake these injections in exactly the same way but the following usually happens;

- You will be prepared for the procedure as per local protocol
- Observations such as blood pressure and pulse rate may be made
- A small needle (cannula) will be placed in the back of your hand
- You will be carefully positioned and the skin around the injection site(s) will be cleaned with an antiseptic solution or spray; this can feel very cold
- X-ray (or an alternative way of guiding the needles) will be used
- You may feel a stinging sensation as local anaesthetic is injected to numb the skin and surrounding tissues. Your doctor will warn you of this first
- There are several ways of doing this procedure and your doctor will provide further information about whether this is one or more injections, or undertaken from the front or back. The doctor will direct the needle to the correct position and confirm this often by using contrast solution (this shows up under X-ray)
- When the injections are made, you may feel pain, pressure, tightness or a pushing sensation. If there is any discomfort, do let the doctor know
What will happen to me after the injections?

After the injection you will be taken to a recovery or ward area where nursing staff will observe you. Sometimes you will be asked to lay flat for about 30 minutes or longer. You may be assisted to sit up and your blood pressure and pulse will be checked. You will be advised when to get dressed and be given assistance to help to ensure that you can stand safely after the procedure.

Your pain will be assessed at rest and during activities of daily living to find out how much pain relief you have obtained following the injection.

When will I be able to go home from hospital after my injections?

You will usually be able to return home within a few hours after the injection and in some cases much sooner, depending on how long your doctor or nurse want you to stay for recovery. Please ensure that you have made arrangements for someone to collect you after the procedure. Failure to do so will likely result in your procedure being cancelled. It is unsafe for you to drive home immediately after the procedure. If you do so your motor insurance will be invalid.

What can I do after my procedure?

Ideally, you should arrange for someone to stay with you for 24 hours but, failing that, you should at least have access to a telephone. You should not drive, operate machinery, sign legal documents, provide childcare unsupervised or drink alcohol until fit to do so.

If in doubt, please discuss these issues with your doctor for further advice.

When can I return to work after the procedure?

This will vary between individuals and may depend on the nature of your work. It is difficult to give general advice and so you should discuss this with your doctor.

Will I experience any side-effects?

As with any procedure, side-effects may occur. These are usually minor but there can be major risks with this procedure and some side-effects may be permanent.

Side-effects may include;

- Mild local tenderness and / or bruising at the site of the injection. This usually settles over the first few days, but sometimes people experience back pain for longer

- Blood pressure may be low after a coeliac plexus block. The nurse will check regularly before you go home. Care will be taken after you first stand up and walk after the procedure. You may well need to have a drip inserted and be given fluids to help keep the blood pressure back to normal. Some centres may ask for special compression stockings (TED stockings) to be worn
• The digestive system may be affected by the procedure. If you have problems with sickness this will usually improve. You may notice your bowel movements are looser than usual, even frank diarrhoea. Please let your doctor know if this is a problem. It is important that you do not get dehydrated after the procedure

• Any local anaesthetic used may rarely spread causing some numbness and/or weakness in your legs and other areas. Should this occur, the effect is temporary and will rapidly resolve over minutes or rarely hours

• Injection treatments are not always effective and may not help your pain

• Infection. This is rare. You should seek medical help if there is local warmth or redness over the site of injection with tenderness and/or you feel hot and unwell. This may require antibiotic treatment

• Intravascular injection. Very rarely inadvertent injection of local anaesthetic may lead to collapse and require medical treatment

• Difficulty with sexual function (Males only). Your doctor can explain

• Paralysis is a rare complication. Your doctor will discuss this fully with you

• Internal organ puncture and damage

• Bleeding from major blood vessel puncture

What can I expect in the days afterwards?

You may experience some soreness or aching at the injection site. Please keep the area of the injection dry for 24 hours following the procedure. Do not worry if your pain feels worse for a few days as this sometimes happens. Your doctor will provide advice about the use of regular pain killers after this injection.

What should I do in the weeks after the injections?

As your pain decreases, you should try to gently increase your exercise. Simple activities like a daily walk, using an exercise bike or swimming on your back will help to improve your muscle tone but your doctor will be able to give you more specific advice. It is best to increase your activities slowly. Try not to overdo things on a good day so that you end up paying for it with more pain the following day.

What follow-up will be arranged?

Though practice may vary, a letter will usually be sent to your GP and your doctor will advise on what to do after the procedure. You may be asked to make a call to the pain department, be given a form to fill in, or given a telephone review or other appointment.
Is there anything else I need to consider before the procedure?

- Please bring your glasses if you need them for reading
- Always bring a list of all current medication
- Continue to take your medication as usual on the treatment day

Finally...

The information in this leaflet is not intended to replace your doctor’s or health care team’s advice. If you require more information or have any questions or concerns please speak to your GP or contact your Pain Clinic.

If you would like this information in another language, large print or audio format please let your doctor know.

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