

The Kent Centre for Pain Medicine and Neuromodulation

Coeliac plexus / splanchnic nerve blocks

Information for patients

This booklet will give you information about **coeliac plexus blocks** and **splanchnic nerve blocks** for chronic abdominal (stomach) pain relief. If you have any questions, please ask your GP or other relevant healthcare professional.

Some types of abdominal pain can be difficult, so your chronic pain consultant may offer you a nerve block. This is a way of numbing a nerve to stop you feeling pain in that area of your body.

How will a nerve block help?

A nerve block is one way of treating your pain. It is not a cure but may reduce your pain temporarily.

Are there any alternatives to this procedure?

A coeliac plexus block or a splanchnic nerve block is an invasive procedure, so we would consider other options first. Various medications and non-medical treatments can help abdominal pain, and we would recommend that you try these first.

What is a coeliac plexus block?

The coeliac plexus is a complicated network of nerves at the back of the abdomen. A coeliac plexus block is a medical procedure where a combination of local anaesthetic and steroids are injected around these nerves. It can be used to help treat pain arising from the pancreas and the surrounding area.



What is a splanchnic nerve block?

The splanchnic nerves are found on both sides of your spine, and go from the spinal cord in the chest to the bowel. They carry pain information to your brain from organs in your abdomen. A splanchnic nerve block can help you stop feeling abdominal pain.

If you have good benefit from the splanchnic nerve block but only for a short time, then you may be offered a different procedure called **splanchnic nerve denervation**. This is very similar to splanchnic nerve block, but for this procedure your consultant will pass a small electric current through a needle to make sure that it is in the right place. The needle tip is then gently heated up for a short time and the nerve fibres supplying the painful area are selectively destroyed by the heat produced, which could give you longer term relief.

Will I have to stay in hospital?

These procedures are usually carried out as day cases (you can go home on the same day), but you will need to stay in Day Surgery for a few hours after your injection. Very occasionally patients are advised to stay overnight in hospital.

What will happen during my procedure?

The procedure is carried out in one of the Day Surgery theatres to minimize your risk of infection.

Shortly before your procedure you will be asked to change into a theatre gown and the doctor will mark the injection site on your back.

The procedure

- The procedure is carried out under x-ray or ultrasound guidance. This allows your doctor to see the specific area to be treated. **It is important that you tell your consultant if there is any possibility that you may be pregnant, as x-rays may harm your baby.**
- You will be asked to lie down on your front. Once you are lying in the correct position your doctor will prepare the area to be treated with an antiseptic solution which may feel cold.
- A cannula will be inserted in to the vein in the back of your hand and you will be given something to make you sleepy.
- A local anaesthetic is injected at the site of the procedure. This may sting to start with, before your skin goes numb.
- Using x-rays, a CT, or ultrasound, your doctor will insert one or more needles (usually two).
- A mixture of steroid and local anaesthetic is then injected.
- A small dressing will be used to cover the injection sites. This can be removed after 24 hours. Do not worry if it falls off sooner.

Will it hurt?

Sedation is not the same as anaesthesia, so you may be aware of some parts of your procedure. If you are uncomfortable, please tell your doctor as more sedation and pain relief can be given.

What are the possible side effects?

- There may be some **pain and bruising** at the needle site.
- You may feel a **little unsteady** when you first stand.
- The injections may make your **pain worse**. This should stop within a few days.
- There is a small risk of **infection** at the site of the injections.
- You may have some **leg weakness or numbness**, which should stop after a few hours.
- In the first few hours after your injection your **blood pressure may be low**. If this happens you will be asked to lie flat and you will be given fluids into a vein in your arm. The nursing team will keep a close eye on this.
- You may have **loose stools or even diarrhoea** after your procedure. This does not usually last long, and may not happen for a day or two. It is quite normal and shows your gut is getting back to normal.
- People with diabetes may have **raised blood sugar** for a short while due to the injection of the steroid.
- On rare occasions some women may temporarily have **irregular periods**.
- **Nerve injury** is rare but possible. If you have any worries, please speak to your GP or phone the Pain Clinic.
- There is a possible risk of **pneumothorax**. **If you feel breathless or have problems breathing following your injection, you must get medical help immediately.**

If you feel unwell, very tired, or dizzy when you stand up, you should contact your GP. If you feel new severe abdominal pain you should ring your doctor immediately or go to your nearest Emergency Department.

What will happen after my injections?

- Your back may be sore for a few hours or even days. This is simple bruising and will settle, but you can take painkillers for it if you need to (for example paracetamol, ibuprofen, or codeine) as recommended by your doctor. Warmth might also help.
- You may notice an immediate improvement, but improvement can be delayed for as long as two weeks. Steroids work slowly, so even if the injections have worked well you may not notice any improvement immediately.
- During this time we would recommend you carry on taking your normal painkillers, though as the injections begin to work you may be able to reduce them.
- You will be taken to the recovery area. You will be discharged home a few hours after your injection.

Can I drive straightaway?

You must not drive for 24 hours following your procedure, please arrange for someone to drive you home from the hospital. We strongly recommend that you have someone stay at home with you until the following day.

What should I do when I return home?

You should avoid any strenuous activities for at least one day after your procedure. However, you should start your normal activities again as soon as possible. Be careful of activities that could hurt your back until the bruising has settled. Avoid sex for at least 24 hours.

Will I need a follow-up appointment?

You will be contacted by telephone in six to eight weeks for a follow-up appointment.

Further information

If you have any concerns regarding the information in this leaflet or your procedure, please phone the Pain Clinic.

Kent Centre for Pain Medicine and Neuromodulation (direct lines)

- Kent and Canterbury Hospital, Canterbury Telephone: 01227 78 30 49
- Queen Elizabeth the Queen Mother Hospital, Margate Telephone: 01843 23 50 94
- William Harvey Hospital, Ashford Telephone: 01233 61 66 91

Useful information

For further information on chronic pain and its treatment options, please go to the East Kent Hospitals Chronic Pain web page www.ekhufft.nhs.uk/chronic-pain-leaflets

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email ekh-tr.pals@nhs.net

Patients should not bring in large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals web site www.ekhufft.nhs.uk/patientinformation