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Complications with Continuous Catheter Nerve Blocks

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Nondisclosure

I have no conflicts of interest in relation to this presentation.

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Regional Anesthesia in OPSC

- Regional anesthesia is beneficial for outpatient surgery
 - Improved postoperative analgesia, minimizing opioid use
 - Decreased complications / adverse side-effects (e.g. respiratory depression, PONV)
 - Shorter average recovery room times / improved quality of recovery
 - Lower hospital readmission rates
 - Relatively few contraindications
- Use of continuous peripheral nerve block (PNB) techniques and extended release local anesthetic delivery systems have extended these benefits beyond the limited duration of single-injection PNBs.

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Prolonged Peripheral Nerve Blocks

LA adjuvants

- Vasoconstrictors (Epi 1:200k – 1:400k)
- Dexamethasone
- Alpha 2 Agonists

Liposomal Bupivacaine LPB (Exparel)

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Continuous Nerve Catheter

Continuous infusion of LA (local anesthetic) through percutaneously-placed catheter adjacent to peripheral nerve

Prolonged duration of anesthesia/analgesia

Planning and patience

- Patient selection/education
- Prolonged time to place catheter - sterile technique
- Increased costs and follow-up
- Associated complications

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Complications with ssPNBs

- Bleeding/hematoma
- Infection
- Allergic reaction
- Nerve injury
- Local Anesthetic Systemic Toxicity (LAST)

Secondary injury: motor block related falls
tissue injury in blocked extremity

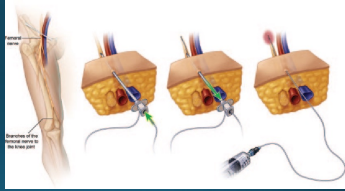
Major complications resulting in permanent (~6 mo) nerve damage **0.015-0.09%**

Sites BD, Teewer AH, Herrick MD, et al. Incidence of local anesthetic systemic toxicity and postoperative neurologic symptoms associated with 17,668 interspersed peripheral nerve blocks. <https://doi.org/10.1093/asac/knab001> (2021) 2021, 1-10

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Risks of Continuous Nerve Catheters

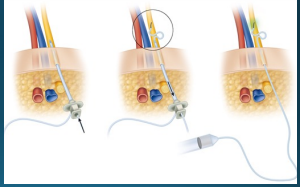
- Failure of Catheter
 - Primary (placement)
 - Secondary
 - Removal
- Needle-induced injuries
 - Bleeding / hematoma
 - Nerve Injury
- Infection
- Local anesthetic induced complications
 - Local Anesthetic Systemic Toxicity/LAST



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Continuous Nerve Catheter Failure


- Primary
 - Improper placement
 - Technically challenging
 - Additional training
- Secondary
 - Catheter displacement
 - Catheter migration
 - Disconnection
 - Leakage of local anesthetic
 - Pump failure



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Primary Catheter Failure: Improper Insertion

- Published failure rates range from **0.5 to 26%**
- Studies support **ultrasound-guidance improves continuous catheter success**




Ilfeld BM. Continuous Peripheral Nerve Blocks: An Update of the Published Evidence and Comparison With Novel, Alternative Analgesic Modalities. Anesth Analg. 2017;Jan;124(1):308-335.

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Primary Catheter Failure: Improper Insertion

- Case Report:**
 - Patient demise after nerve catheter placed under GA
 - Catheter inserted 7 cm beyond the needle tip
 - Bolus administered post-operatively without prolonged observation of patient
 - "Interscalene" catheter was actually *intrathecal*
- Imperative to:** Confirm catheter placement
Monitor patient after bolus




Yanovski B, Gattimi L, Volodarski N, Ben-David N. Catastrophic complication of an interscalene catheter for continuous peripheral nerve block analgesia. Anaesthesia 2012, 67, 1166-1169

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Secondary Catheter Failure

- Leakage at site
- Dislodgement
- Catheter obstruction
- Difficulty removing
 - Catheter retention during withdrawal
 - Loop, knot, kink (case reports)
 - Shearing
- Stimulating catheters* more commonly retained



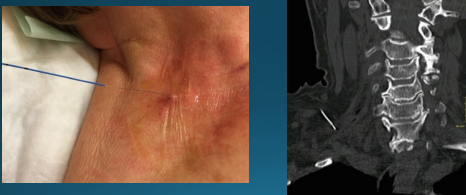
Ilfeld BM. Continuous Peripheral Nerve Blocks: An Update of the Published Evidence and Comparison With Novel, Alternative Analgesic Modalities. Anesth Analg. 2017;Jan;124(1):308-335. doi: 10.1213/ANE.0000000000000938. PMID: 27492954

Ilfeld B, Essner D, Morey T, Enneking K. Ambulatory perineural infusions: the patients' perspective. Reg Pain Med 2003;8:458-23.

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Secondary Catheter Failure

Stimulating catheters more commonly retained



Yanovski B, Gattimi L, Volodarski N, Ben-David N. Catastrophic complication of an interscalene catheter for continuous peripheral nerve block analgesia. Anaesthesiology. 2012, 67(10), 1166-1169

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Secondary Catheter Failure


- 1458 patients with Interscalene catheter
- Tubing obstruction
- Pump/catheter disconnection
- Persistent alarming from the electronic pump
- Pump-related issues were higher for the electronic device compared with the elastomeric pump
- 12% patients seeking medical advice, usually by telephone

Medical advice sought at home	174 (12%)
Pump or tubing technical issues	28 (2%)
Catheter leakage	111 (8%)


Fradetteau M, Lightfoot P, Wang A, Chaffin M, Alayash A, Fingleton C. An analysis of 1458 consecutive patients receiving continuous interscalene analgesia at home in an ultrarapid prospective safety study. *Anaesthesia*. 2020;75(12):1272-8. doi: 10.1111/anae.15275. Epub 2020 Feb 9. PMID: 31842277

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Secondary Catheter Failure: Variability between types of block



Before infusion



During infusion
drops of fluid from leaking around the catheter


Adverse event	Number of adverse events and additional interventions by catheter type		
	EC (n=174)	EC (n=181)	EC (n=442)
Residual blockade	18	11	3
Leakage	31	7	1
Numbness	22	10	1
Dislodgement	14	8	2
Breathing difficulty	0	0	0

King R, Mariano ER, Ygnik M, Kou A, Kim TE, Hunter OO, Howard SK, Mudumbai SC. Outcomes of Ambulatory Upper Extremity Surgery Patients Discharged Home with Perineural Catheters from a Veterans Health Administration Medical Center. *Pain Med*. 2019 Nov 4;20(11):2256-2265. doi: 10.1093/pm/pnz313. PMID: 31667666

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Secondary Catheter Failure: Leakage

- 1644 patients, 748 without and 896 with Dermabond[®]
- 2-Octyl Cyanoacrylate glue
 - Decreased leakage problem by a factor of 10
 - Decreased dislodged catheters
- Peri-catheter leakage at 24 h was 0% (Dermabond[®]) versus 93% (sterile strips)
- Displacement at 24 hours 6.7% versus 93.3%




Gurramy N, Wirthmann C, et al. Dermabond[®] versus sterile adhesive strips for pericatheter leakage and catheter displacement in ambulatory upper extremity surgery patients. *Anesth Analg*. 2015;121:3066. doi: 10.1093/anae/kav313. Epub 2015 Jun 10. PMID: 26000000

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Mitigating Catheter Migration or Dislodgement


- Insertion technique
 - ? tunnel catheter
- Securing carefully
 - Dermabond[®], Tegaderm
- Patient education: postop care positioning / activity



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Bleeding and / or Hematoma

- Considerations for diagnosing bleeding complications at home
 - Patient education
 - Post-operative communication
- Anti-coagulation pre-operatively and/or post-operatively
- Sight of injection - deep blocks higher risk
 - Psoas catheter causing retroperitoneal hematoma




Warner NS, Duncan CM, Kopp SL. Acute retroperitoneal hematoma after psoas catheter placement in a patient with myeloproliferative thrombocytosis and aspirin therapy. *AA Case Rep*. 2016;6:2830. doi: 10.1093/aaap/aaq001. PMID: 27000000

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Postoperative Neurologic Symptoms (PONS) Peripheral Nerve Injury (PNI)

- Potential catheter-associated risks:
 - ? Increased concentration of local anesthetics
 - ? Prolonged exposure





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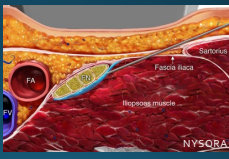
Risk of Nerve Injury after ssPNB

1-2 / 5,000
0.02-0.04%
> 6 months

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Postoperative Neurologic Symptoms (PONS) Peripheral Nerve Injury (PNI)

- Prospective study 1010 ssPNBs
- 8.2% day 10
- 3.7% at 1 month
- 0.6% at 6 months



Frederickson MJ, Kilfoyle DH. Neurological complication analysis of 1000 ultrasound guided peripheral nerve blocks for elective orthopaedic surgery: a prospective study. *Anaesthesia*. 2009 Aug;64(8):836-44. doi: 10.1111/j.1365-2044.2009.05938.x. PMID: 19604186.

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Postoperative Neurologic Symptoms (PONS) Peripheral Nerve Injury (PNI)

- Prospective study 1505 interscalene catheters
- 7.3% patients reported tingling, weakness or pain ~1 month
- 3.2% > 3 months
- 1.8% > 6 months
- 0.7% > 12 months




Frederickson MJ, Loughton P, Wong A, Chaddock M, Abayasinghe A, Prampack C. An analysis of postoperative pain, tingling, numbness, weakness or paralysis of the arm: a multicentre prospective safety study. *Anaesthesia*. 2006;71:373-79.

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Infection


- Site of catheter
- Duration of catheter
- Patient risks factors



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Infection

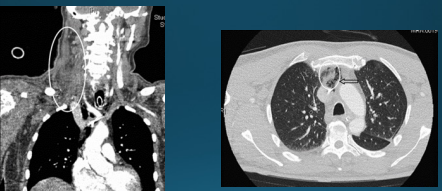
- Rates of inflammation (3%–4%) and catheter colonization (6%–57%)
- Clinically relevant infection rare (0%–3%)



Dott D, Canlas C, Sobey C, Obrensky W, Thomson AB. Necrotizing Fasciitis as a Complication of a Continuous Sciatic Nerve Catheter Using the Lateral Popliteal Approach. *Reg Anesth Pain Med*. 2026 Nov;Dec;4(16):728-730. doi: 10.1097/AAP.0000000000000482. PMID: 27662064.

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Infection



Capdevila X, Jaber S, Pesonen P, et al. Acute necrotic cellulitis and mediastinitis complicating a continuous interscalene block. *Anesth Analg* 2008;107:1419-1421

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Infection

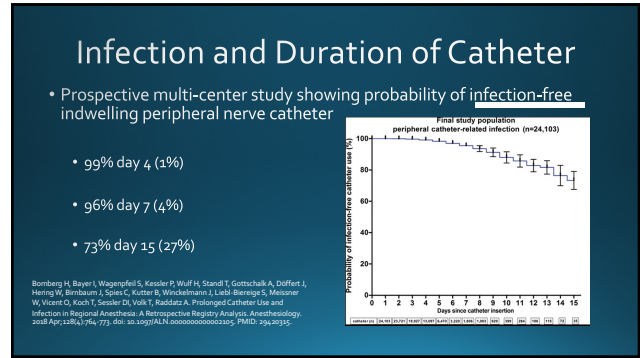
Table 4. Results of Catheter Culture for Each CPNB Group

	Interscalene (n = 256)	Axillary (n = 126)	PCB (n = 23)	Femoral (n = 683)	Fascia I (n = 94)	Sciatic (n = 32)	Popliteal (n = 167)	Distal (n = 38)
Catheters with culture, (n) %	(n = 166) 64.9	(n = 77) 61.1	(n = 15) 76.9	(n = 485) 71.1	(n = 65) 69.3	(n = 25) 77.4	(n = 112) 67.5	(n = 24) 63.3
Colonized catheters, % [95% CI]	25.6 [19-32]	36.5 [25.5-47.4]	20 [2.4-37.5]	28.6 [14.9-52.2]	28.6 [14.9-42.2]	30.4 [11.6-49.2]	19.9 [11.6-26.2]	35.3 [24-47.4]
Organisms, %								
Coagulase-negative staphylococcus	83	56.7	66.7	52.3	35.7	75	77.3	69.6
SA	4.3	6.7	0	4.6	7.1	0	0	8.7
Enterococcus	2.1	3.3	0	9.9	14.3	12.5	0	0
Other gram-positive cocci	6.4	3.3	0	1.3	0	0	0	0
Gram-negative bacillus	0	63.7	33.3	27.1	42.7	12.5	18.1	21.7
Others	4.2	6.6	0	4.8	0.2	0	4.6	0

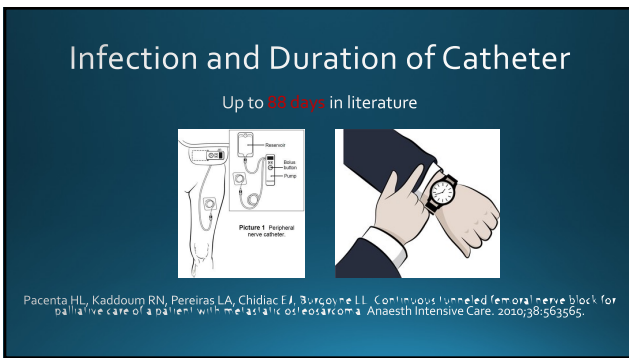
Axillary = axillary catheter; CI = confidence interval; CPNB = continuous peripheral nerve block; Distal = distal nerve block catheter (cubital or median nerve); Fascia I = fascia iliac compartment block catheter; Femoral = femoral catheter; Interscalene = catheter of the brachial plexus through interscalene approach; PCB = catheter in the lumbar plexus through a posterior approach; Popliteal = popliteal catheter; SA = Staphylococcus aureus; Sciatic = sciatic catheter through a posterior approach.

Capdevila X, Plati P, Bringer S, Gauthier E, Singlet F, Bernard N, Choquet Q, Bouaziz H, Bonnet F, French Study Group on Continuous Peripheral Nerve Blocks. Continuous peripheral nerve blocks in hospital wards after orthopedic surgery: a multicenter prospective analysis of the quality of postoperative analgesia and complications in 1,446 patients. Anesthesiology. 2005 Nov;63(5):1035-45. doi: 10.1097/00000612-200511000-00018. PMID: 16309791

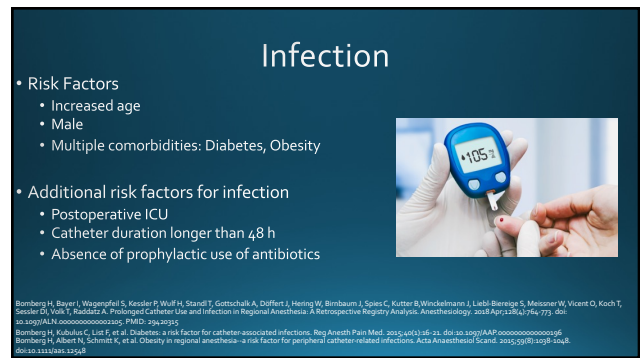
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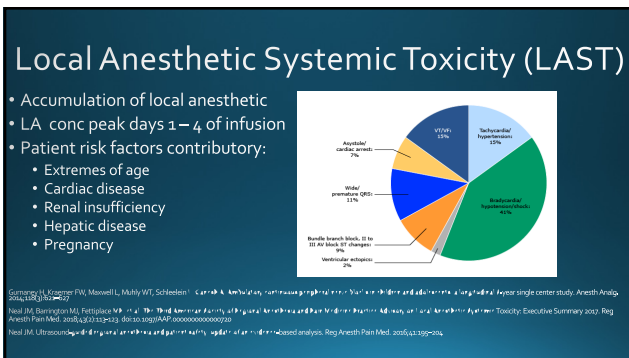
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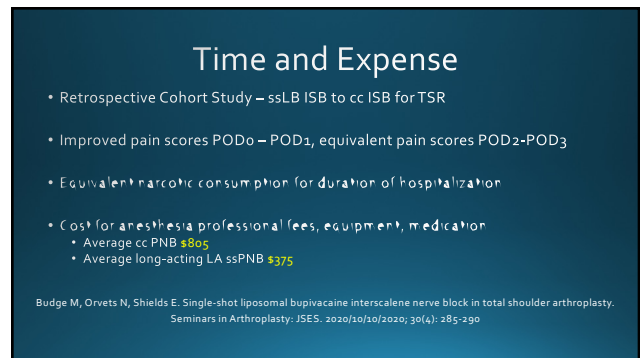
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Time and Expense

- Extensive time commitment for placement, confirmation, securing catheter compared to ss PNB
- Requires more technical skill / training for catheter
- Management of catheter requires support service/acute pain team to educate, manage, trouble-shoot catheter

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Patient Satisfaction/Support

Complication	25 (N = 33)	18 (N = 30)	P value
Anesthetic site complications			
Discomfort	12 (36.4%)	2 (7.1%)	.007
Swelling	10 (30.3%)	2 (7.1%)	.023
Irritation	9 (27.3%)	1 (3.6%)	.041
Other complications	7 (21.2%)	1 (3.6%)	.042
Facial flushing/itch	2 (6.1%)	0	
Pain	1 (3.0%)	0	
Hand swelling	1 (3.0%)	1 (3.6%)	
Nausea	1 (3.0%)	0	
Pruritus	15 (45.5%)	8 (28.6%)	.175
Spontaneous	12 (36.4%)	8 (28.6%)	.518
Total complication rate	59 (78.9%)	22 (73.3%)	<.001

25: Versiplex catheter; 18: Espomel hydrophobic bonded silicone cath.

The InFuSystem Nursing Hotline is Here for You 24/7. Call 1-800-315-3287 for Assistance.

When your physician is your primary source for information about your treatment, there may be times during your treatment that you need assistance with your infusion pump. Our team of compassionate and knowledgeable Registered Nurses (RNs) is here to assist every step of the way.

- Answers to questions about your infusion pump
- Assistance with pump alarms
- Assisting patients in more than 240 languages


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How to avoid complications?

Provider Education

- Ultrasound-guidance training
- PNB selection / Technique
- Patient Selection
- LA selection
- Monitoring

Patient education



Acknowledgements: Ashley Shilling MD, Hanae Tokita MD, Sakura Kinjo MD

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