COELIAC PLEXUS INJECTION

The coeliac plexus is a place in the abdomen or belly where there is a concentration of nerves that supply the intestines and other abdominal organs.

Injection of the coeliac plexus is used to treat pain from these organs. Because the injection is difficult, and occasionally dangerous, it is used for severe pain that has not responded to other treatments.

THE INJECTION

We usually start with a test, injecting a local anaesthetic (bupivacaine) and sometimes a steroid (methylprednisolone) to reduce inflammation around the nerves. This test will show that the pain can be treated by turning off the nerves of the celiac plexus. The help is temporary, a few days at most, but any problems are also temporary.

When the injection is performed, you will need to lie on your stomach for about 20 minutes. A small needle is put irito a vein on your hand or forearm so that we can give medicines rapidly should they be needed. An X-ray machine is used to take pictures of the injection. If there is any possibility of pregnancy, then we cannot perform the injection. The site of the injection is cleaned with cold antiseptic. A smail injection of local anaesthetic (iidocaine), which stings for a few seconds, is used to numb the skin on either side of the middle of the back.

Two needles are then pushed through the skin, on either side of the back, and carefully moved past the backbone to lie next to the coeliac plexus. This may take a few minutes, and is sometimes uncomfortable. The needles are checked by injecting a small amount of iodine-containing dye (iopamido() that shows up in the X-rays.

The treatment is then injected. You may feel some warmth, a little discomfort, or some numbness.

Because of the effects of the injection, you should not travel home alone, and someone should stay with you on the day of the injection.

If the pain is helped then you will be asked to return for a long-lasting treatment. This is done in the same way, but the injection includes a chemical (alcohol or phenol) that will kill the nerves of the coeliac plexus. The injection will last for several months until the nerves grow back.

PROBLEMS

The most common problem is a drop in blood pressure, and a feeling of faintness after the injection.

The most serious problem is damage to nearby nerves from spread of the injection outside the coeliac plexus. The problems occurring after long-term treatment include paralysis of the legs, unpieasant sensations in the legs, impotence and bladder incontinence, but occur in less than one patient in twohundred. Some patients develop weakness or numbness around the hips. Many patients have diarrhoea or loose motions after the injection.

The injection cannot be given to patients who are sensitive or allergic to the drugs and chemicals used. We put a dressing over the injection, and you should teil us if you are aiiergic to piasters, tapes or dressings. it is too dangerous to perform the injection on patients with clotting problems, or are taking anticoagulants. It is also too dangerous to perform the injection when there is an infection of the abdomen or the skin of the back, or septicaemia.