This handout will help you learn more about your celiac plexus block: what to expect, how to get ready, and what to watch for when you get home.

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<th>When and where will the block be done?</th>
<th>VIHA Pain Program – RJH Site</th>
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<td>Date of procedure: ____________________</td>
<td>Homer 2, Memorial Pavilion</td>
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<tr>
<td>Time of procedure: ____________________</td>
<td>Royal Jubilee Hospital</td>
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PLEASE ARRIVE 30 MINUTES BEFORE PROCEDURE.

*Note: There is also a possibility that this procedure might take place in the Operating Room. If this is the case, you will be informed in advance.

VIHA Pain Program Web site: [www.viha.ca/pain_program](http://www.viha.ca/pain_program)

If you need to cancel, please contact the Pain Program at least 48 hours before your procedure.

**What is a celiac plexus block?**

A block is an injection of a local anaesthetic (freezing) near a group of nerves. The freezing “numbs” the nerves and blocks pain signals. When a block is done near a group of nerves called the celiac plexus (also called the solar plexus), it is called a celiac plexus block.

The celiac plexus is a group of nerves found in the abdomen (belly). These nerves lead into other nerve bundles for other body parts, such as the liver, gall bladder, pancreas, small bowel, and parts of the large bowel. These nerves also send messages, including pain signals, from these body parts to the brain.

**Why is a celiac plexus block done?**

A celiac plexus block is usually done to treat chronic abdominal (belly) pain from diseases such as pancreatitis.

**Who will do the block?**

The Pain Program doctor will explain the procedure to you and do the block. The injection may take only a few minutes. Sometimes an X-ray or CT scan is used to guide the needle in place. If this applies to you, the procedure may take 30 minutes or longer.
Are there any side effects or risks with this procedure?

Although a nerve block is generally safe, no procedure is risk free. Possible side effects and risks are:

- Temporary pain in the back. This is the most common side effect.
- Bruising at the injection site.
- Numbness or tingling, and weakness of the legs. This is a result of the local anesthetic and may last 2-3 hours. You may be at risk for falls during this time, so caution is encouraged.
- Allergic reaction to the local anesthetic or contrast dye (rare).
- Temporary low blood pressure, which can be treated with intravenous (IV) fluids.
- Dizziness. Lying down and sitting up slowly usually helps. Make sure someone helps you to stand up the first time.
- Diarrhea. This usually only lasts about 48 hours if it happens at all.
- Pain symptoms do not change or get worse.
- Rare complications include: Headache from leakage of spinal fluid, block of or injury to the spinal nerves, puncture injuries (e.g. lung, pancreas, or bowel), impotence, partial paralysis of the stomach, puncture and bleeding from large blood vessels, severe bleeding or clotting of blood vessels near the injection site, and infection.

How do I get ready for the nerve block?

- Please review pamphlet: “Simple Steps for a Safe Outpatient Visit”.
- Wear comfortable clothing that is easy to take off and put on. Wear low heeled, non-slip shoes.
- Avoid wearing scented products such as perfume or aftershave.
- Arrange for a responsible person to bring you to the hospital and take you home (by car, taxi or bus). Make sure this person can be contacted by phone at anytime during the day of your procedure. You cannot drive yourself or go home alone in a taxi or bus.
- Make sure you have access to a phone when you get home after the procedure. This is so you can contact the hospital in case you have a reaction to the procedure.
- Tell the Pain Program doctor and nurses if you have any allergies. Make sure to tell them if you have ever had a reaction to the dye used when begin X-rayed.
- Bring your regular pain medications with you. You may need to take some on your way home after the procedure.
Stopping medications

- **Important!! Do not stop any medication without direction!**
- We need to know in advance if you are an insulin-dependent diabetic.
- **If you take an injectable blood thinner (e.g. low-molecular weight Heparin), tell your Pain Program doctor or clinic staff at least 7 days before your procedure.**
- If you take any of the following anticoagulants (blood thinners), you will be directed to stop them 7 days before your procedure:
  - clopidogrel (Plavix®)
  - rivaroxaban (Xaralto®)
  - apixaban (Eliquis®)
  - dabigatran (Pradax®)
  - warfarin (Coumadin®)
- If you take warfarin, ask your family doctor to arrange for an INR blood test to be done the day before your procedure. If your procedure is scheduled on a Monday, the INR can be drawn on admission to hospital. If your INR is too high, your procedure will need to be rescheduled.
- Take all other regular medications with a sip of water on the morning of your block unless your Pain Program doctor has told you not to.

Eating and drinking

- **No solid foods** for 5 hours before the procedure. This includes chewing gum and sucking on hard candies.
- Clear fluids are allowed until 3 hours before your procedure time.
- **No fluids at all** in the 3-hour period before your scheduled procedure time.

Clear fluids include:
- Water, clear tea, coffee without cream
- Pop, soda, or popsicles
- Jell-O (with no added toppings or fruit)
- Fruit juice without pulp (e.g. apple juice)

Clear fluids DO NOT include:
- Milk, non-dairy creamer, protein beverages, dairy beverages, tomato or orange juice with pulp
- Alcoholic beverages

How is the procedure done?

- You will have an intravenous (IV) placed in a vein in your arm. In the procedure room, the nurse will check your blood pressure and measure the oxygen in your blood using a clip on the outside of your finger. The nurse may also give you oxygen through tube under your nose or through a mask.
You will lie on your stomach. The area to be injected will be cleaned with an antiseptic solution.

The doctor will numb the skin and deeper tissues using a very thin needle before inserting the block injection needles. Local anesthetic (e.g. Lidocaine or Bupivacaine) is used for the block. Sometimes alcohol or other nerve-killing solution is used. You may feel strong pressure, but little pain, during the injection.

Soon after the injection, your legs may feel warm and your pain may lessen or go away.

A bandaid will be placed over the injection site. The nurse will continue to check your heart rate and blood pressure until you are ready to go home.

Care at home

- You must not drive the day of your procedure.
- Resume your regular activities, but take it easy for a day or two. Do not do anything strenuous for at least 24 hours.
- Resume your normal diet. Be sure to drink plenty of fluids.
- You may shower after your return home from the procedure. Do not take a tub bath until the day after.
- If the injection site is painful, apply ice or a cold pack over the injection site. Put it on and off for about 15 minutes each time.
- You may want to take some pain medication before the local anesthetic wears off. You can take an anti-inflammatory such as ibuprofen, or take a medication that you normally take for pain.
- If a local anesthetic was used, your pain may return in a few hours. If alcohol was used, the results may last for several weeks or months. The procedure may need to be repeated.
- Keep a diary of your pain following the injection and bring it with you to your next appointment. This will help when discussing the results of your injection with your doctor.

Call your family doctor or the Pain Program if you have:

- Chills or fever of 38.3°C or greater
- Redness or drainage at the injection site
- Headache that does not go away
- Increase in pain or your legs are getting weak
- Any other unusual or new symptoms

If your doctor or Pain Program staff is not available, go to the nearest Emergency Department.

The information in this handout is intended only for the person it was given to by the health care team. It does not replace the advice or directions given to you by your doctor.