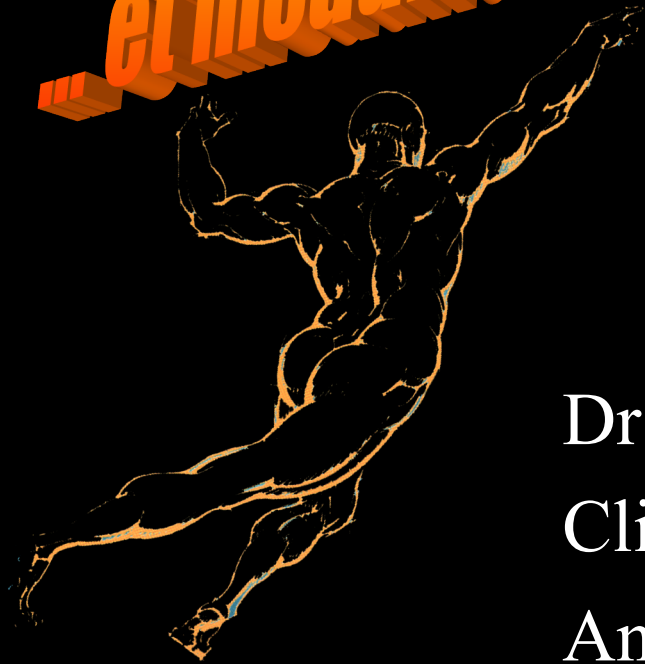


**On ne vous a pas tout dit sur les blocs standards :
axillaire, fémoral, poplité et interscalénique
... et médullaire !**



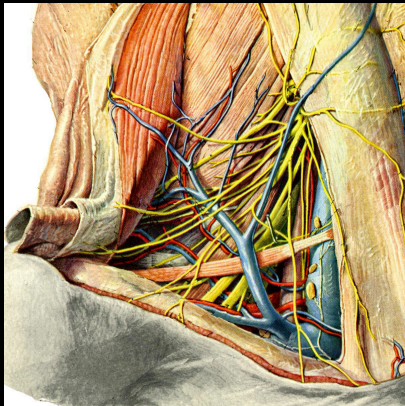
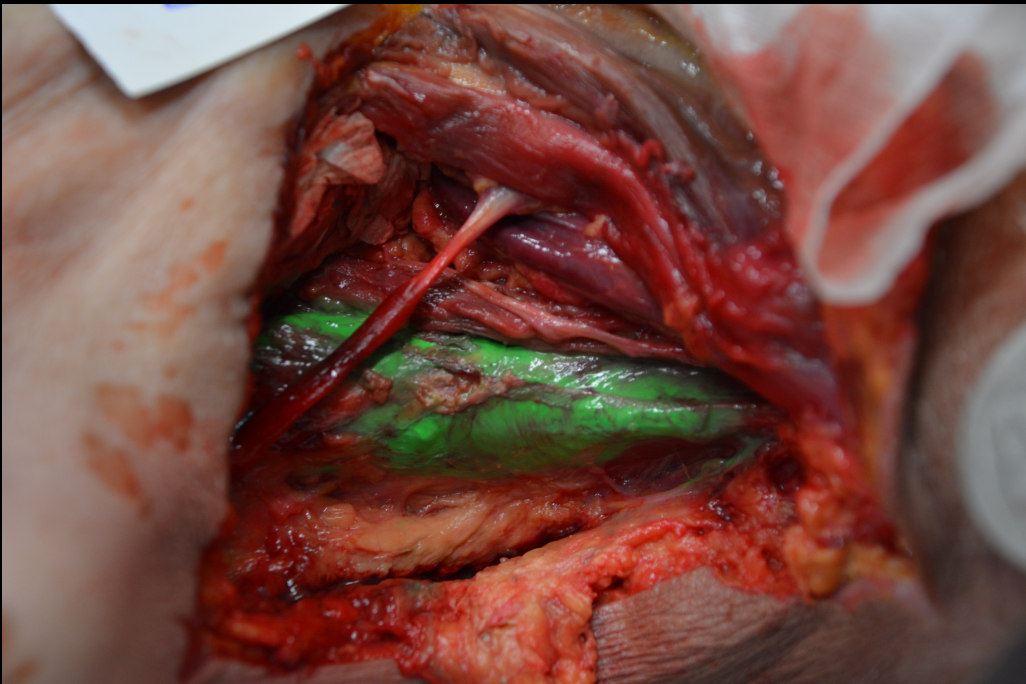
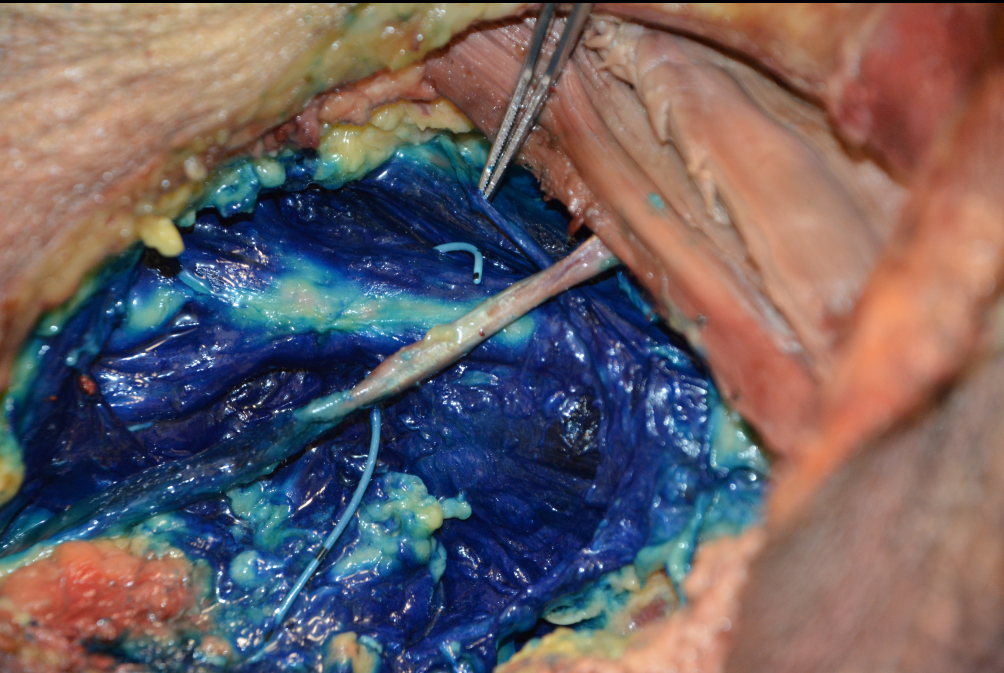
Dr Laurent Delaunay
Clinique Générale-Vivalto Santé
Annecy

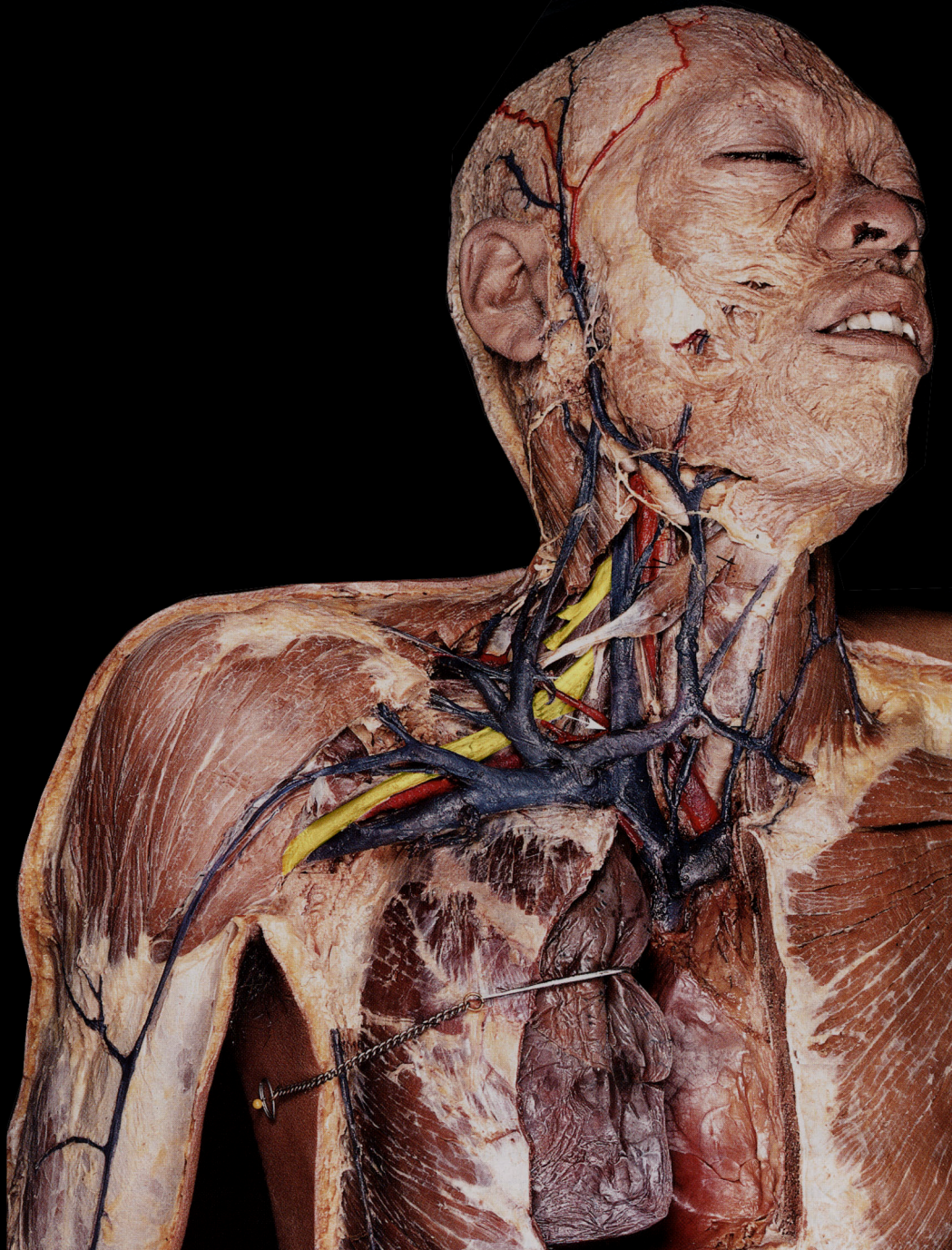


Clinique Générale
ANNECY
Un établissement de l'Institut de Santé
Généraliste Annecy

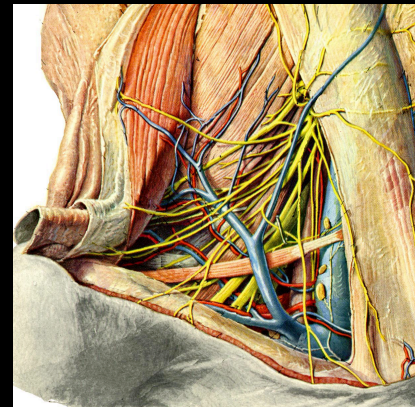


0 206 288 000





- La fosse supraclaviculaire est un triangle considéré comme dangereux par les anatomistes et les chirurgiens !





Res

S

MB

2012Mar06 02:01

Nrv

L50



99%

MI

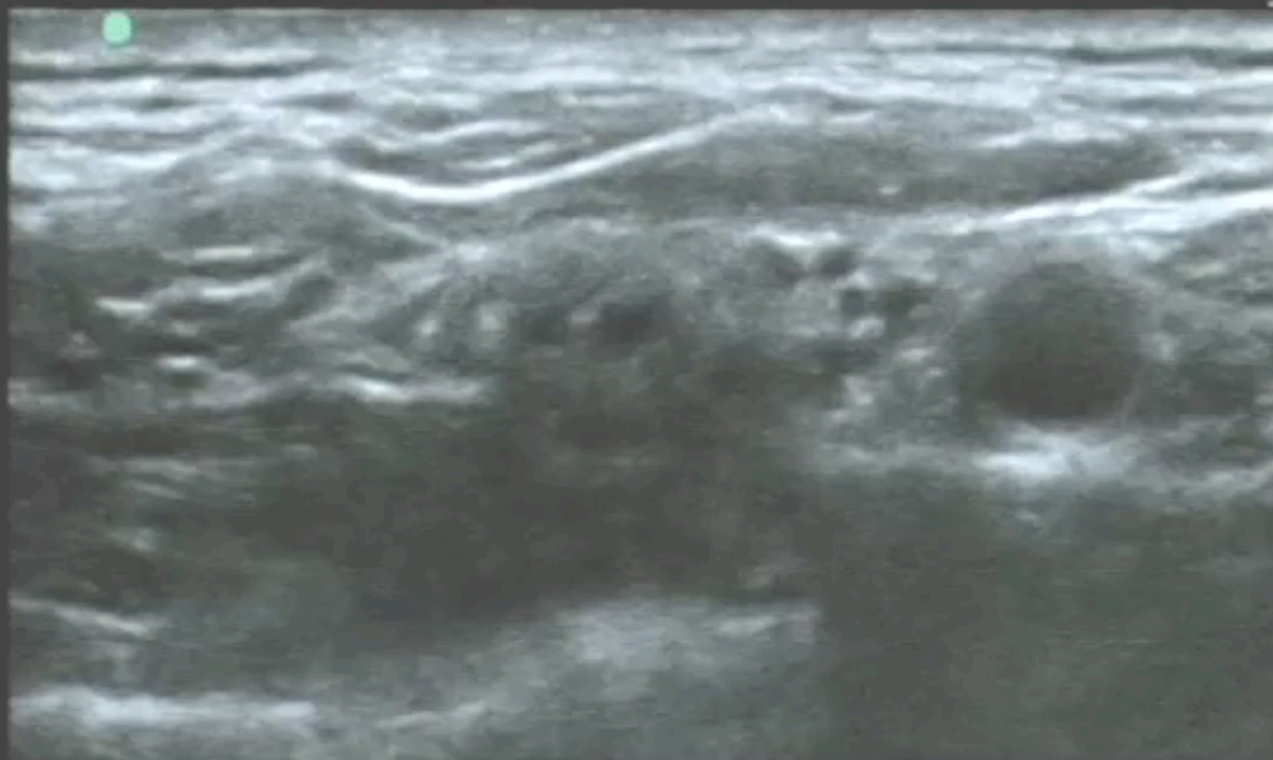
0.9

TIS

0.1

A

B



2.7



Res



+3



Guide

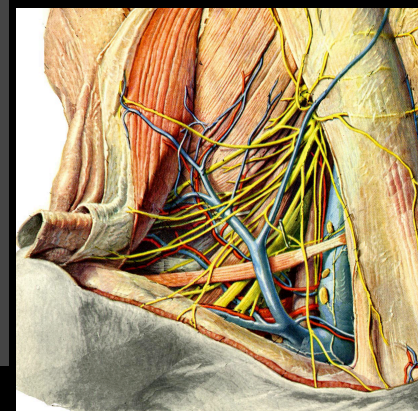


MB On



Dual

Page 1/2



Quels volumes ?

- Etudes Cliniques prospectives «up & down»
 - *Des volumes entre 5 et 10 ml seraient suffisant*
 - *Extension sur C5-C6*

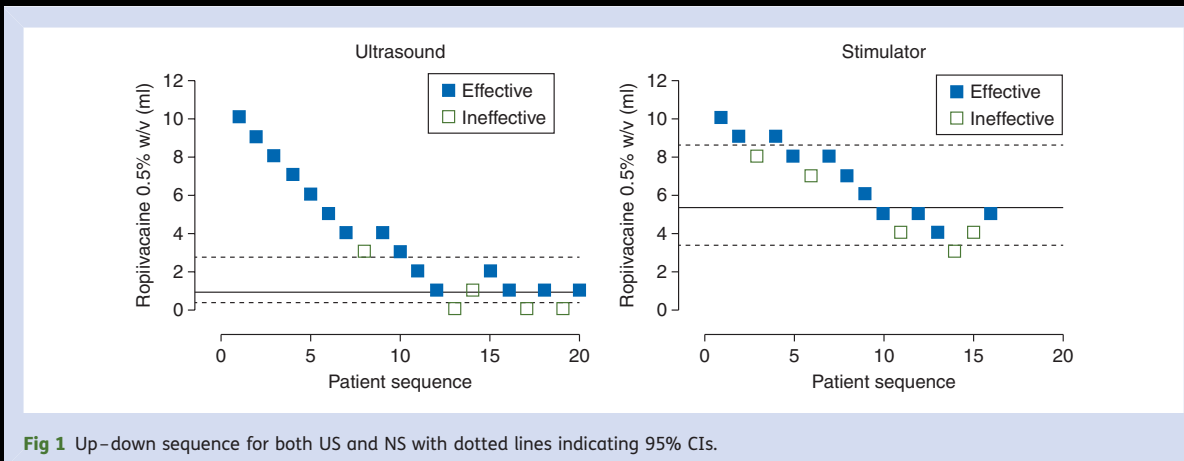
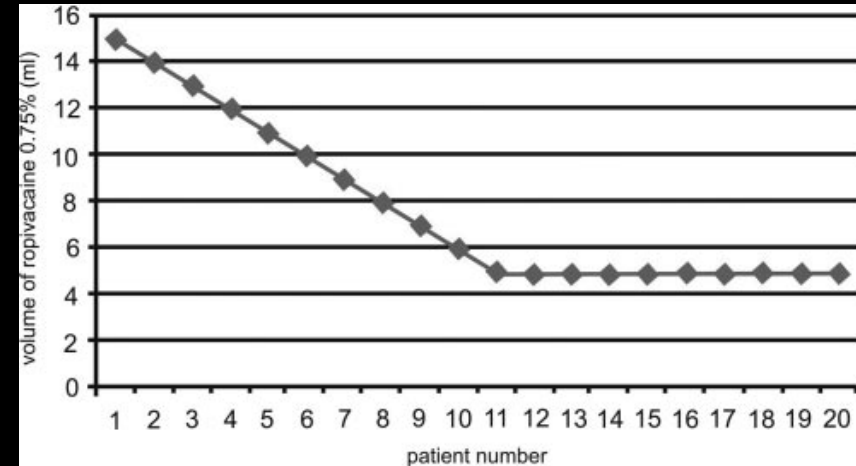
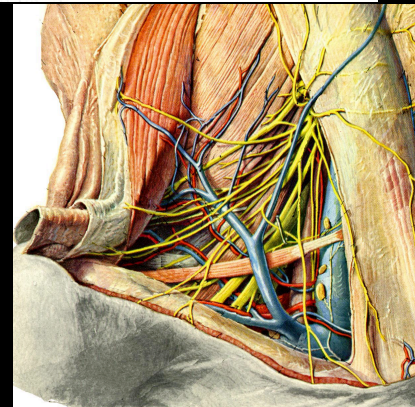
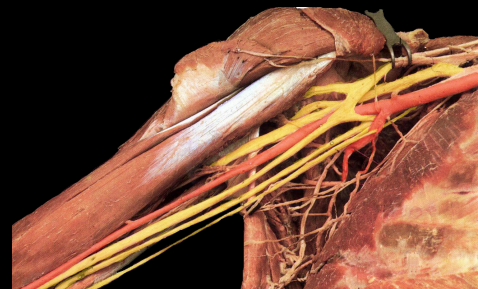
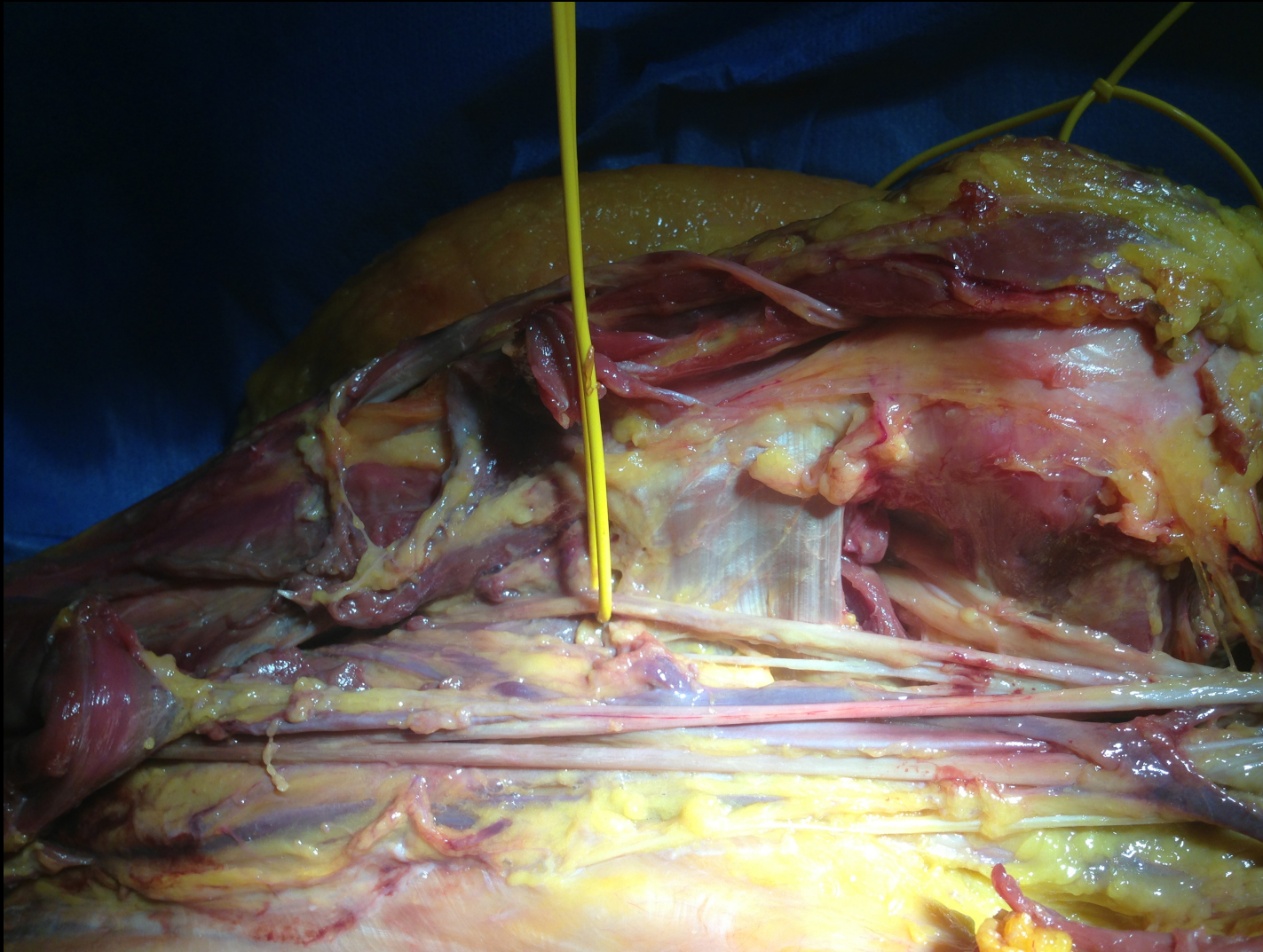


Fig 1 Up-down sequence for both US and NS with dotted lines indicating 95% CIs.



McNaught BJA 2011
Gautier Anest Analg 2011





Rés
S MB

2011Ao011 08:45

Neu
L50



99%

IM

0,9

ITM

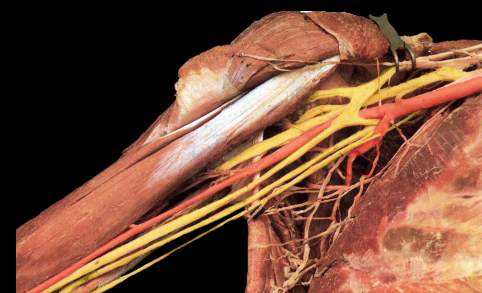
0,1

A

B

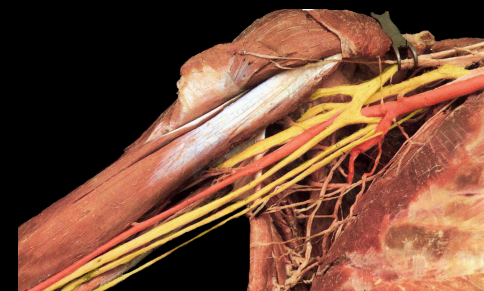
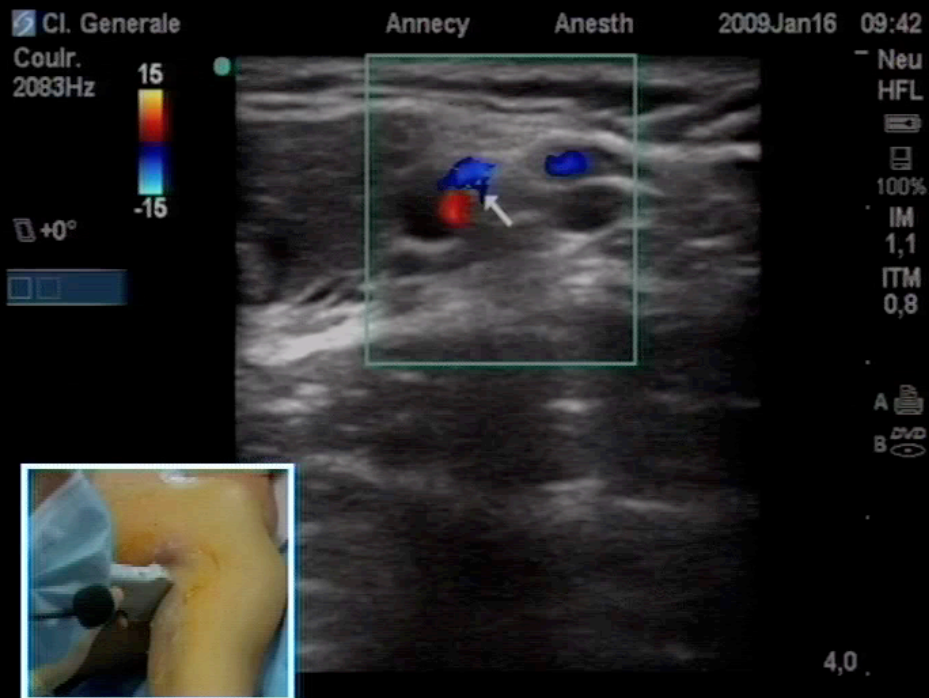


2,7



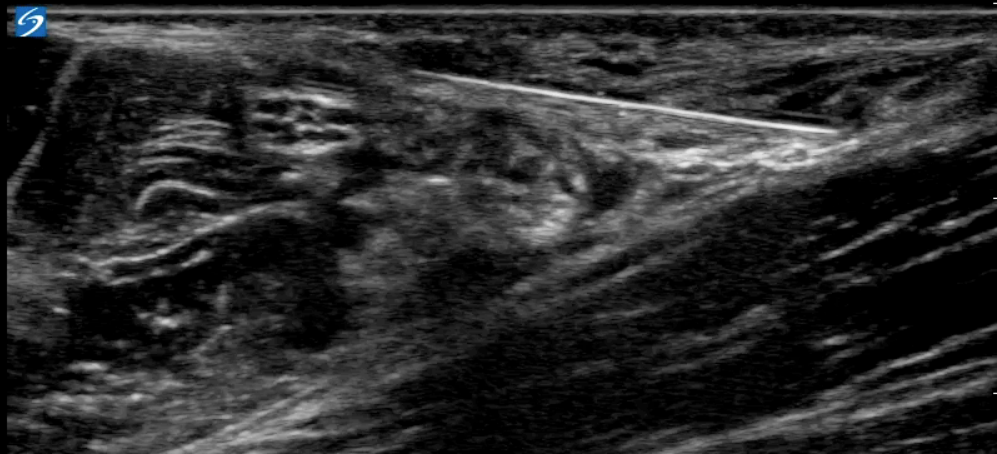
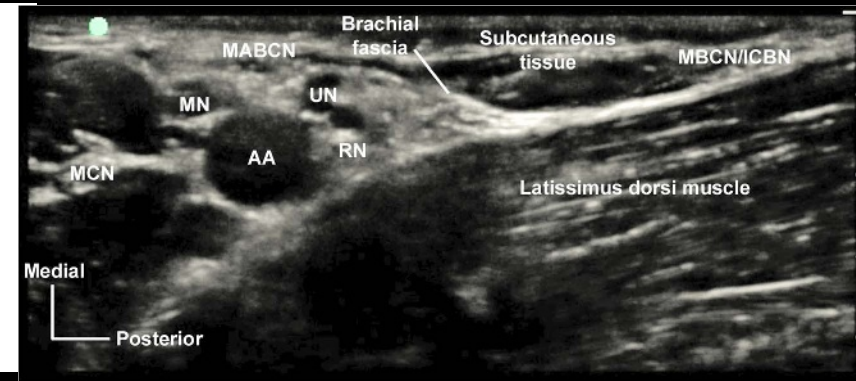
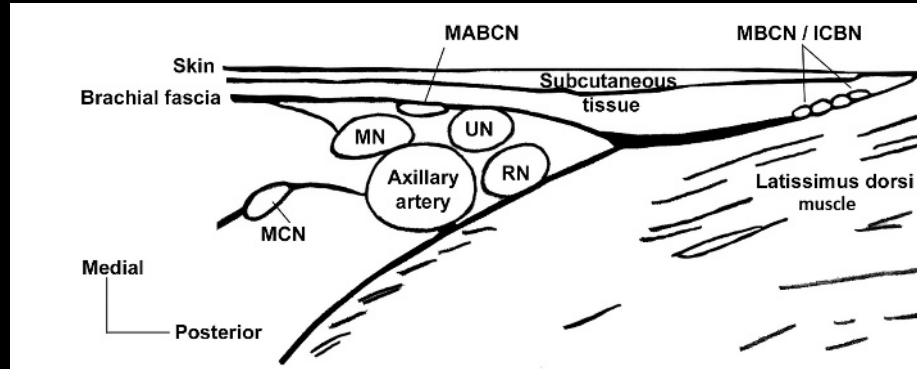
Région axillaire

Variations



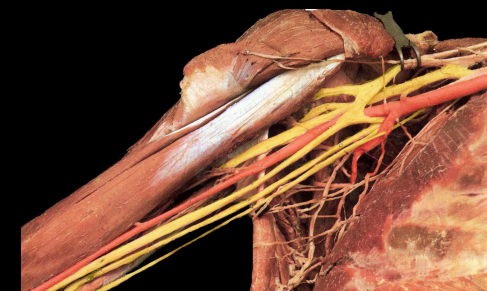
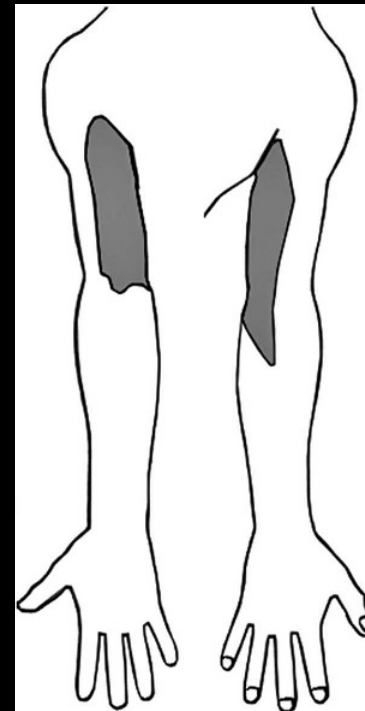
Ultrasound-Guided Selective Versus Conventional Block of the Medial Brachial Cutaneous and the Intercostobrachial Nerves A Randomized Clinical Trial

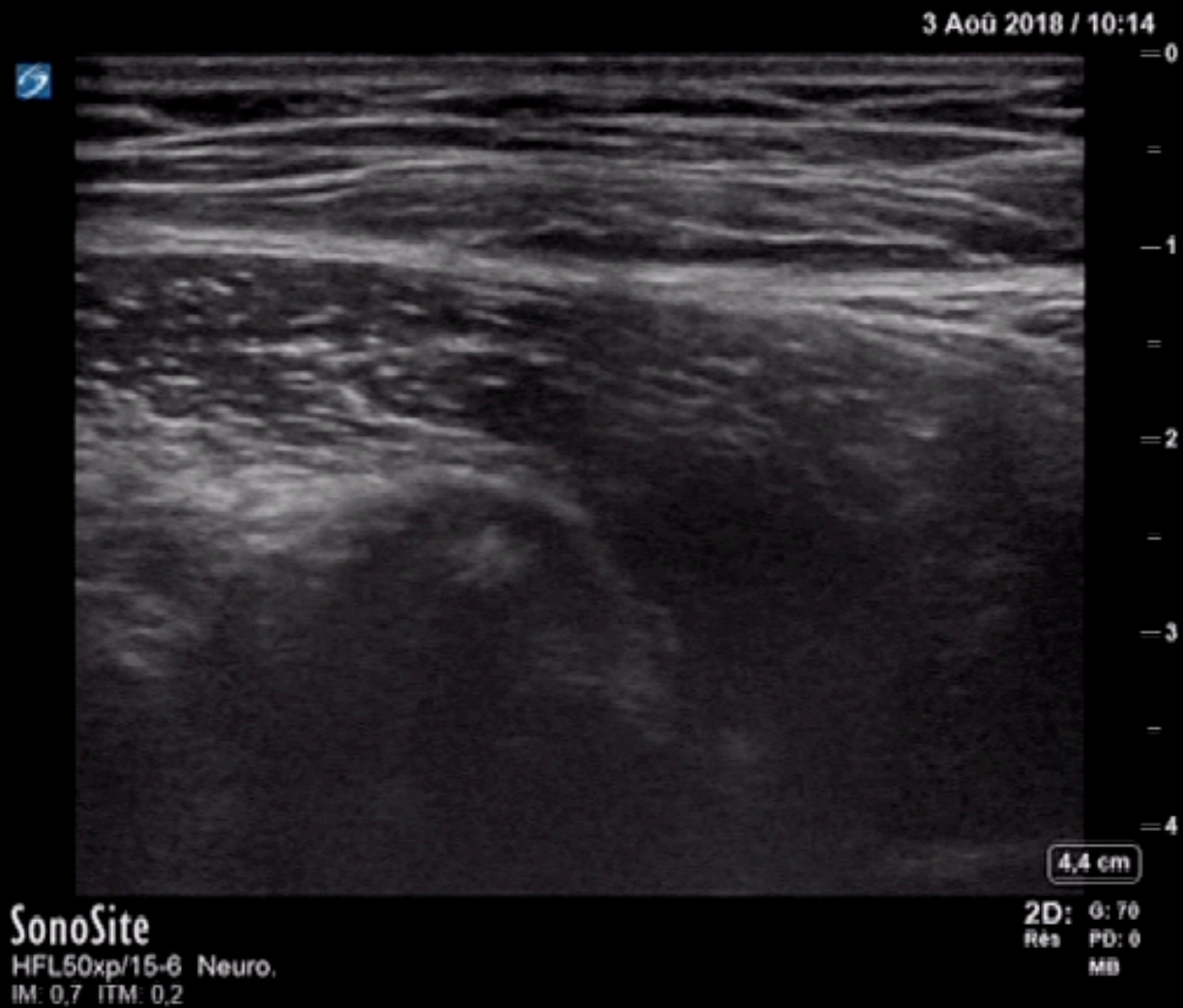
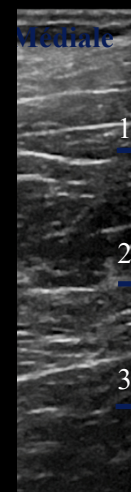
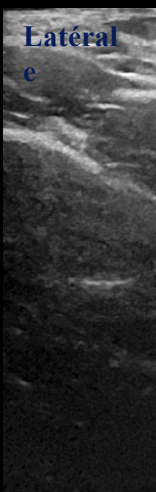
Philippe Magazzeni, MD,* Denis Jochum, MD,† Gabriella Iohom, MD,‡ Gérard Mekler, MD,*
Eliane Albuissou, MD, PhD,§ and Hervé Bouaziz, MD, PhD*



SonoSite
HFL50xp/15-6 Neuro
IM: 0,8 ITM: 0,2

2,3 cm
2D: G: 56
PD: +1
MB

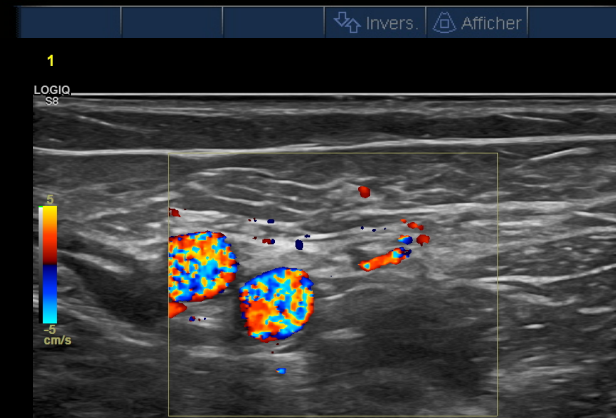
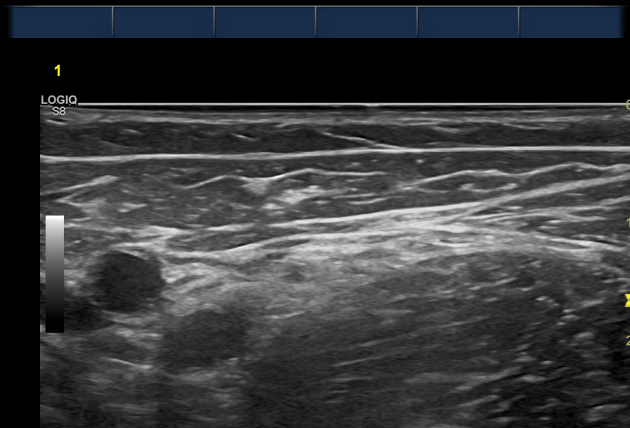
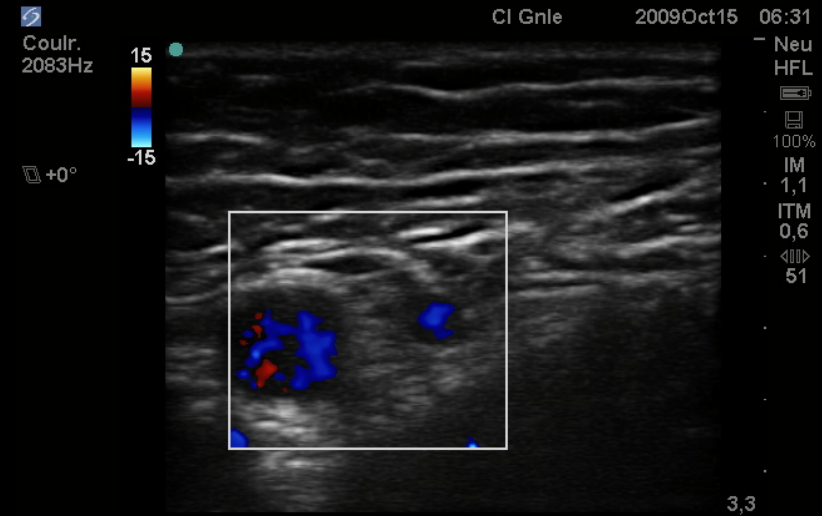
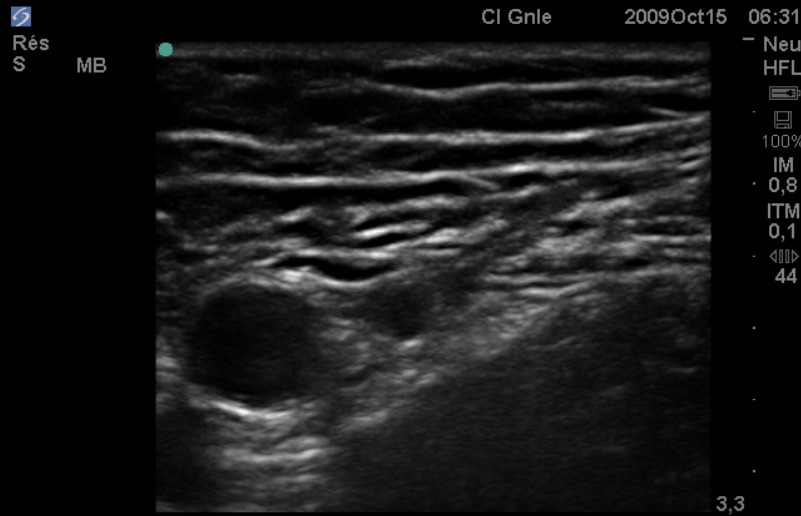




Image



Bloc fémoral



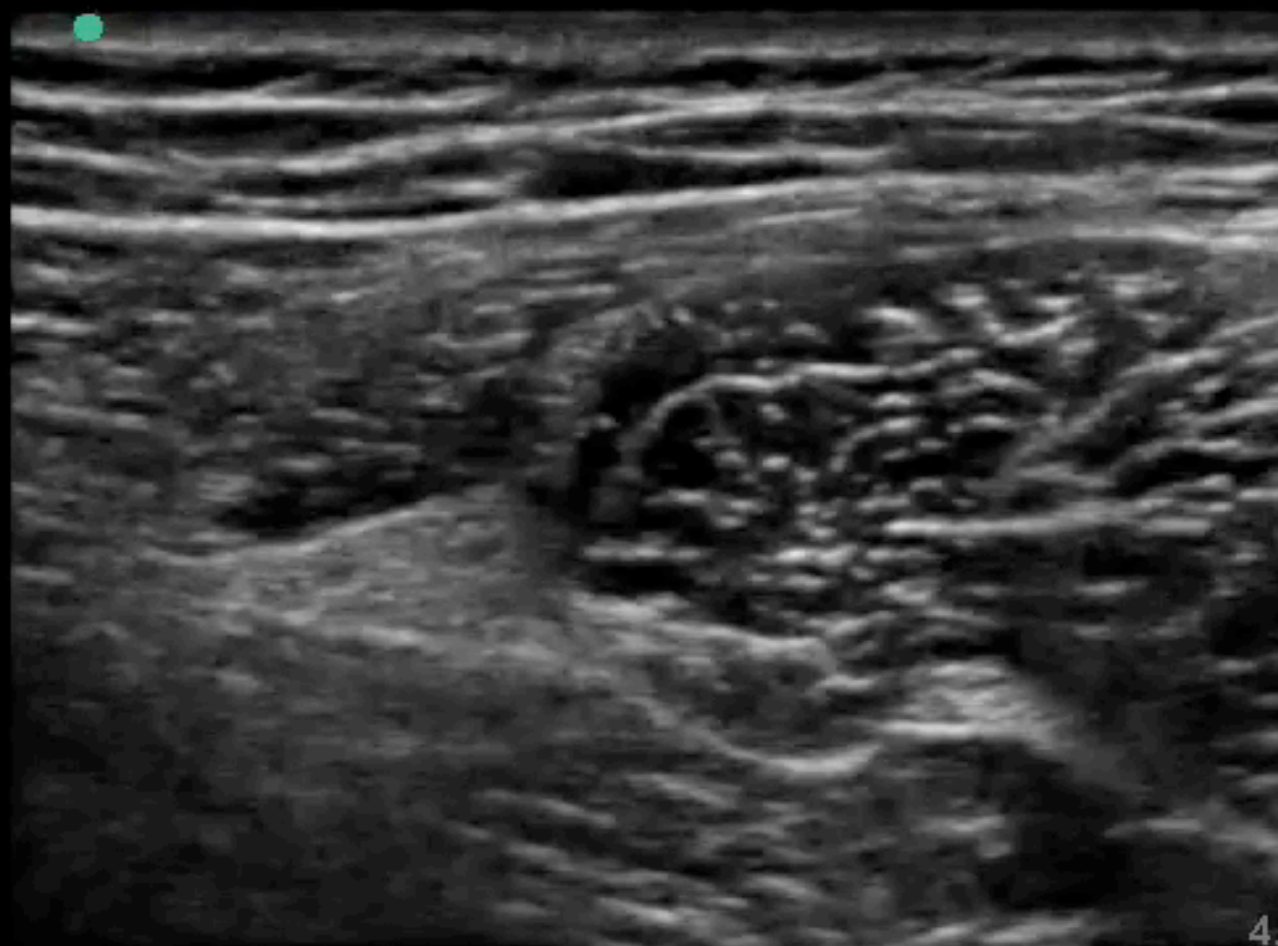
Attention aux vaisseaux circonflexes



medipole garonne 31

2012Aoü02 10:10

Gén
S MB



Neu
L50



83%

IM
1,0

ITM
0,1

A

B



Gén



0



Guide

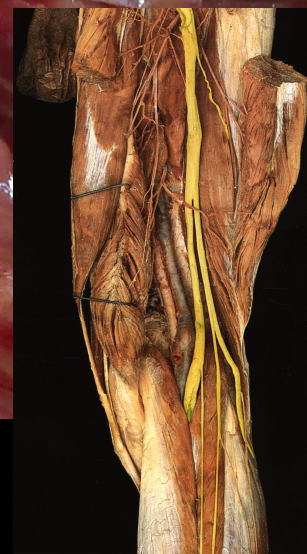
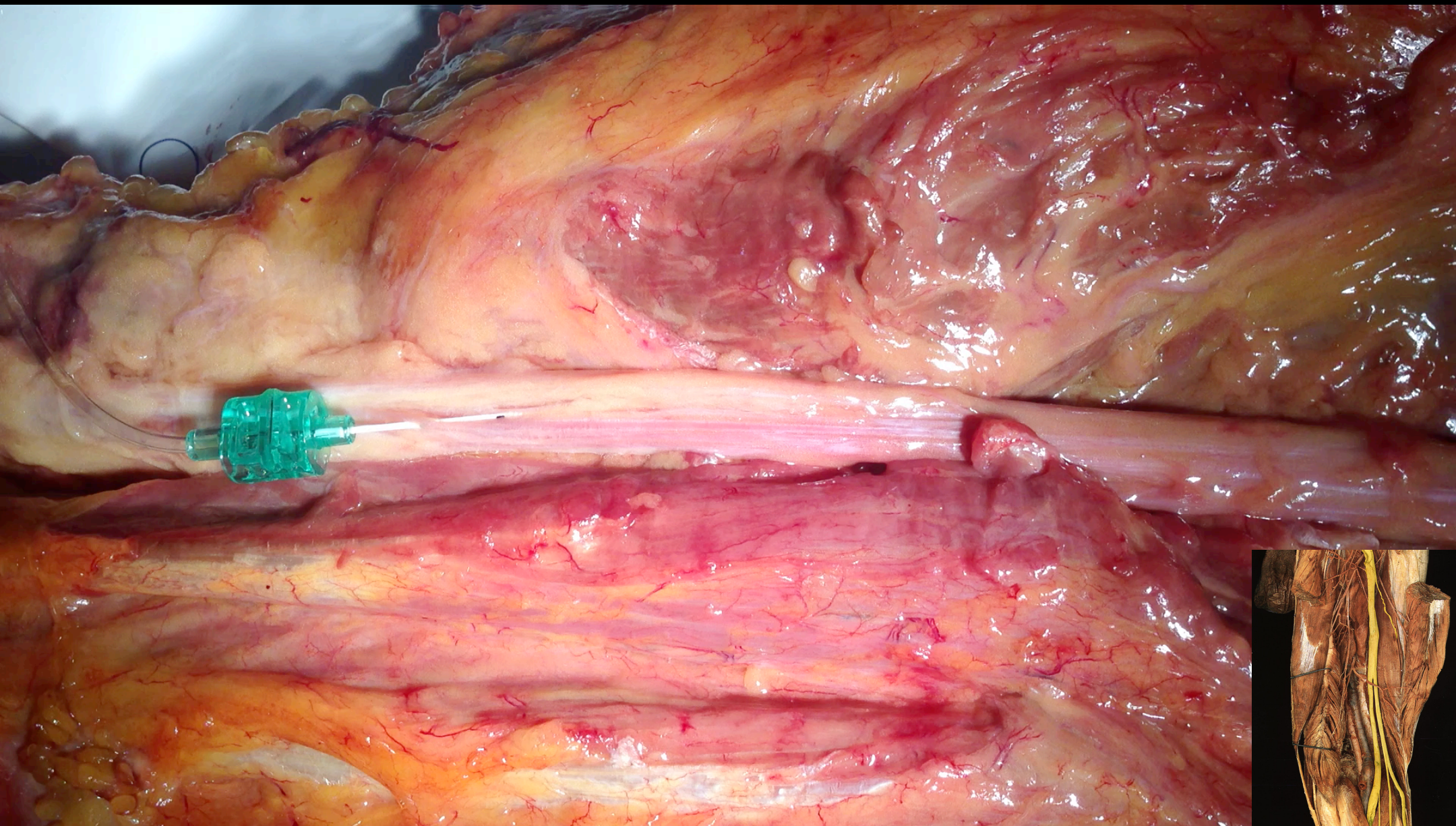


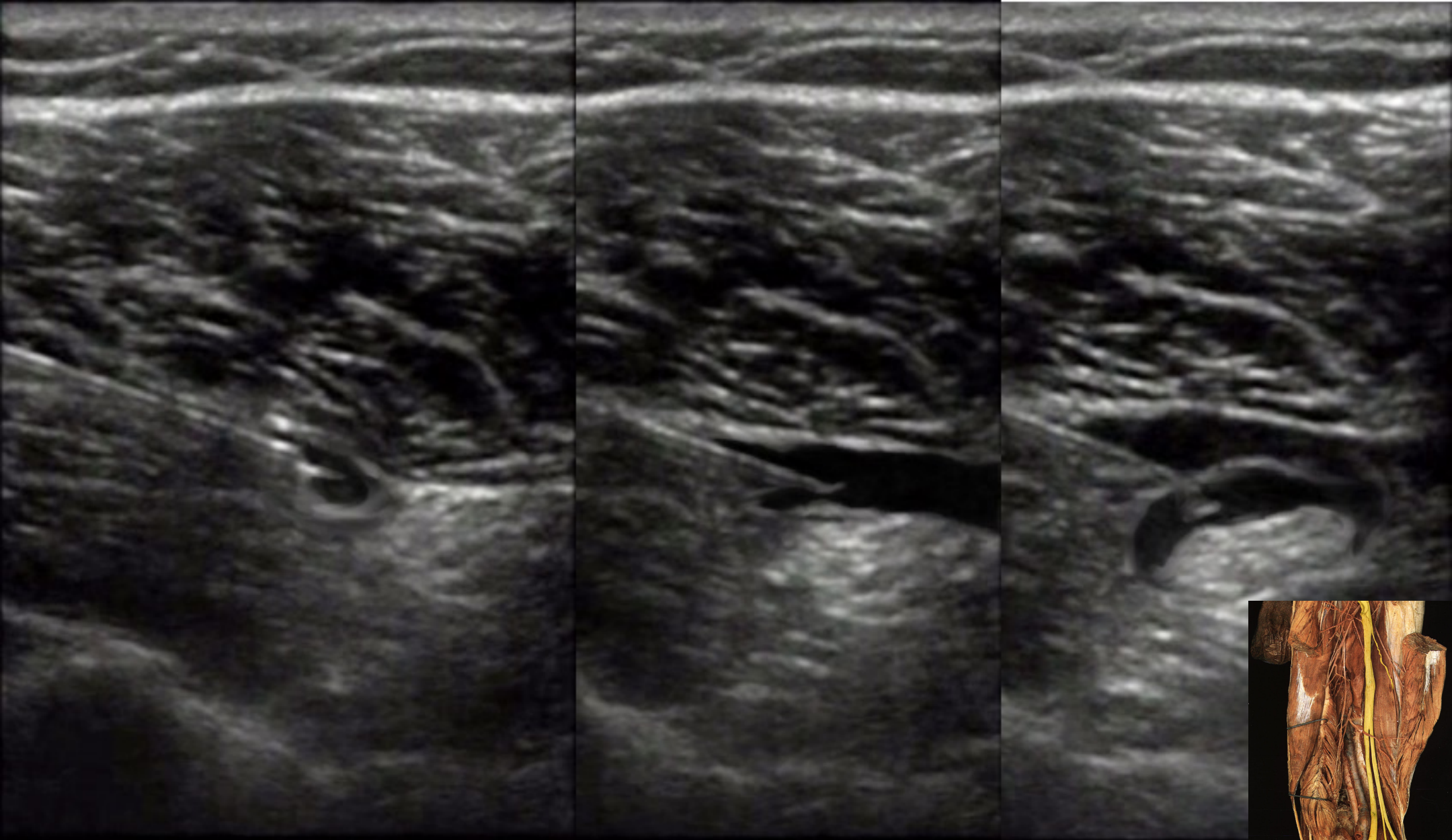
MB Oui



Double

Page 1/2





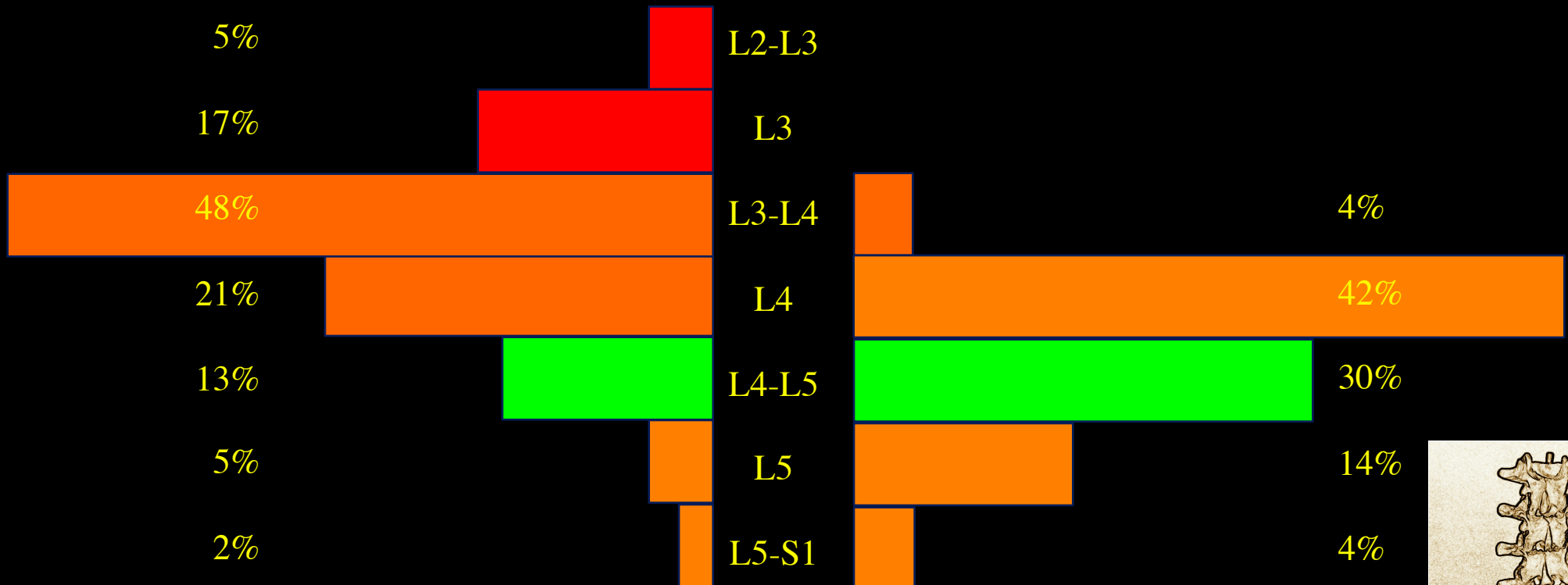
Déterminer la rotation vertébrale



Réussir la ponction

Repérage par palpation
121 parturientes à terme

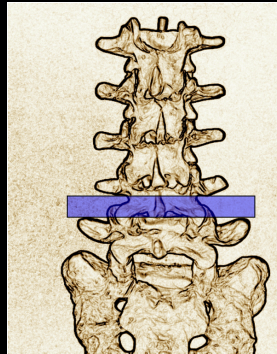
Etude radiographique
163 patients en décubitus dorsal



La ligne de Tuffier n'est pas un repère absolu

Kettani A et al. AFAR

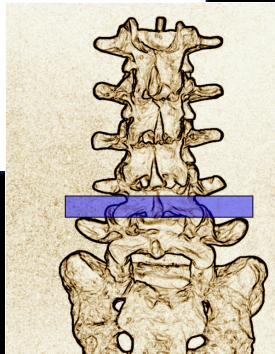
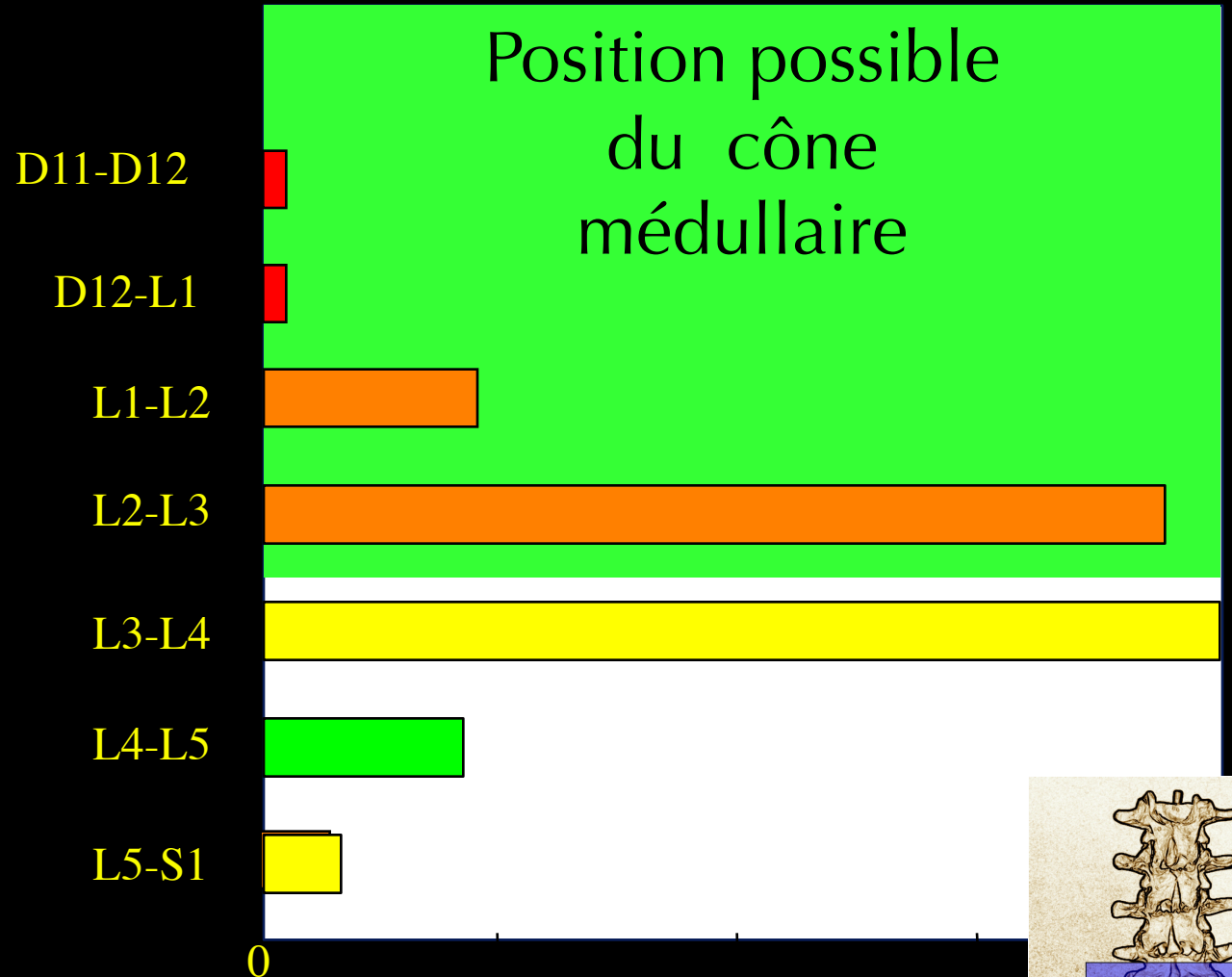
C. Render. Anesthesia 1996 ; 51 : 1070-71

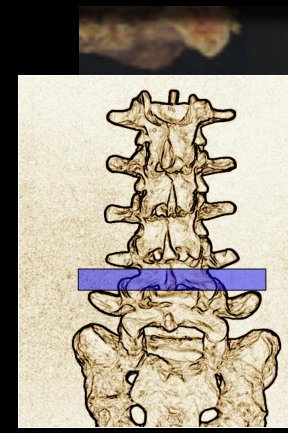
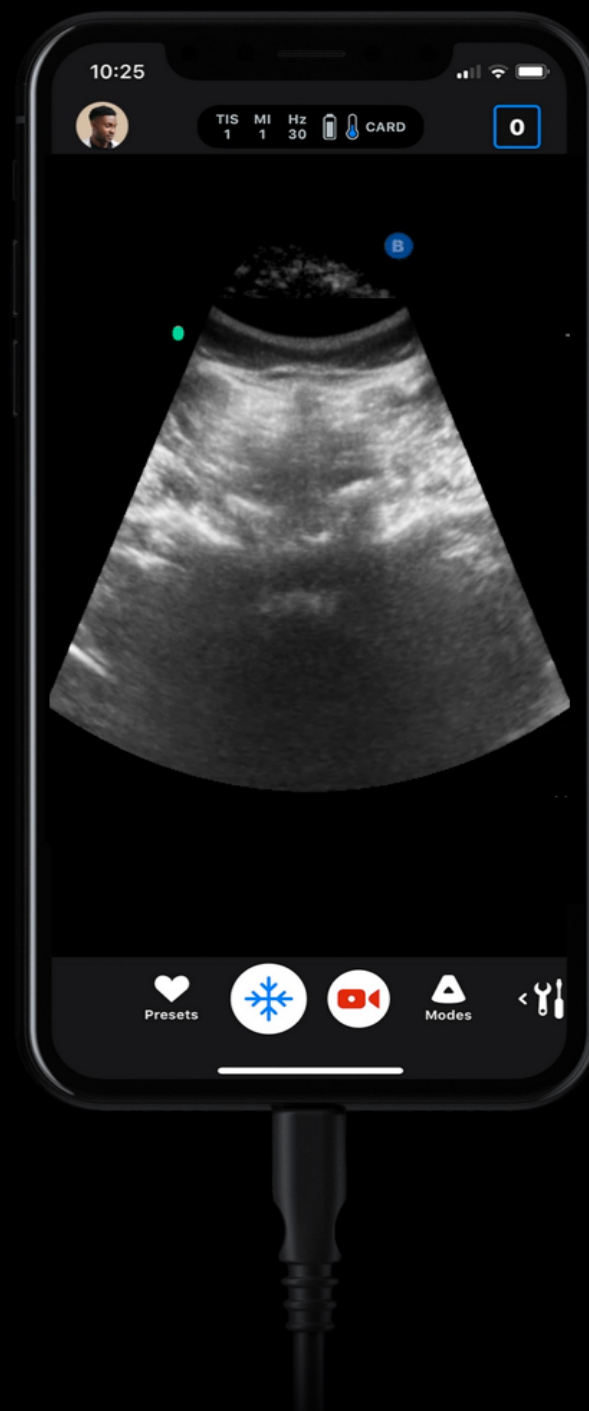


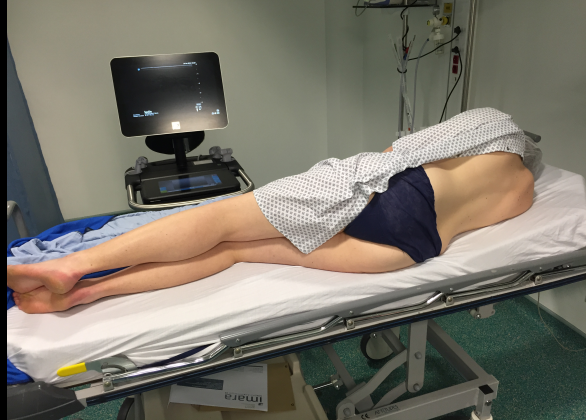
Réussir la ponction

200 rachianesthésies
réalisées par des
anesthésistes.

Espace réel de ponction
vérifié par radiographie
du rachis

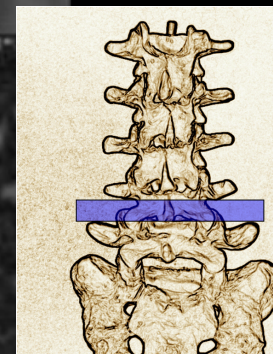
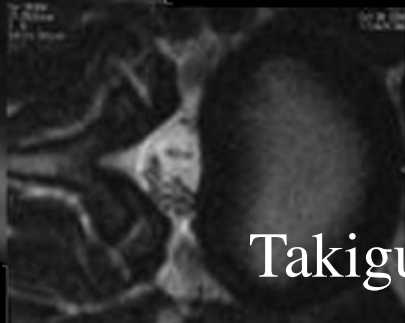






La position

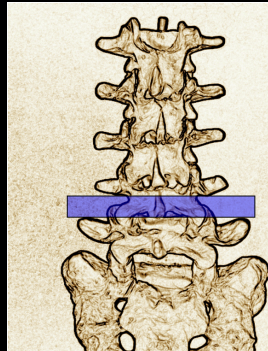
en avant : pour « laisser pas



Takiguchi RAPM 2009

Rachianesthésie

Comment faire pour avoir 99,9% de réussite ?



Distribution of Local Anesthetic Solutions within the Subarachnoid Space

Nicholas M. Greene, MD

ANESTH ANALG
1985;64:715-30

Table 2 Factors affecting intrathecal spread of local anaesthetics, modified from Greene⁴⁸

Characteristics of the injected solution

- Baricity
- Volume/dose/concentration
- Temperature of injectate
- Viscosity
- Additives

Clinical technique

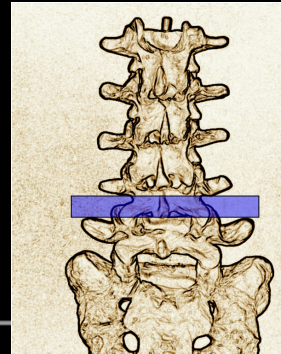
- Patient position
- Level of injection
- Needle type/alignment
- Intrathecal catheters
- Fluid currents
- Epidural injection

Patient characteristics

- Age
- Height
- Weight
- Sex
- Intra-abdominal pressure
- Spinal anatomy
- Lumbosacral cerebrospinal fluid volume
- Pregnancy

On maitrise !

On peut en
tenir compte



Distribution of Local Anesthetic Solutions within the Subarachnoid Space

Nicholas M. Greene, MD

ANESTH ANALG
1985;64:715-30

Table 2 Factors affecting intrathecal spread of local anaesthetics, modified from Greene⁴⁸

Characteristics of the injected solution

- Baricity
- Volume/dose/concentration
- Temperature of injectate
- Viscosity
- Additives

Clinical technique

- Patient position
- Level of injection
- Needle type/alignment
- Intrathecal catheters
- Fluid currents
- Epidural injection

Patient characteristics

- Age
- Height
- Weight
- Sex
- Intra-abdominal pressure
- Spinal anatomy
- Lumbosacral cerebrospinal fluid volume
- Pregnancy

On en a aucune
Idée !



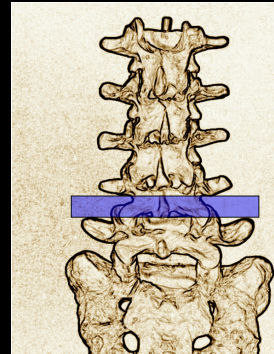


Photo JP Estebe



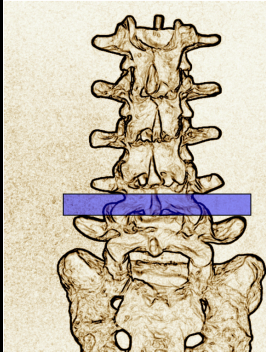
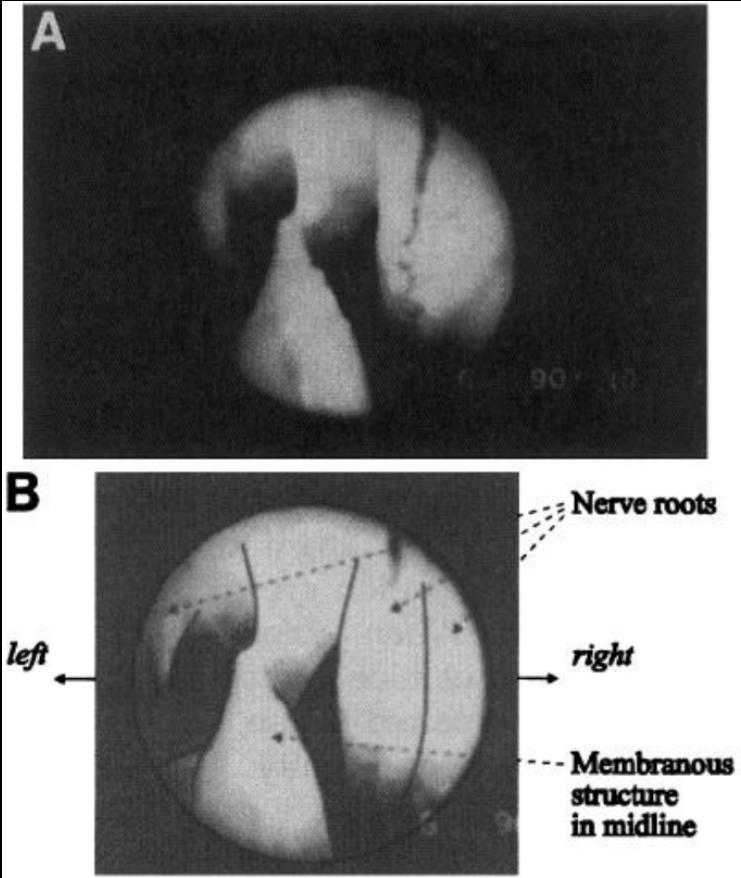
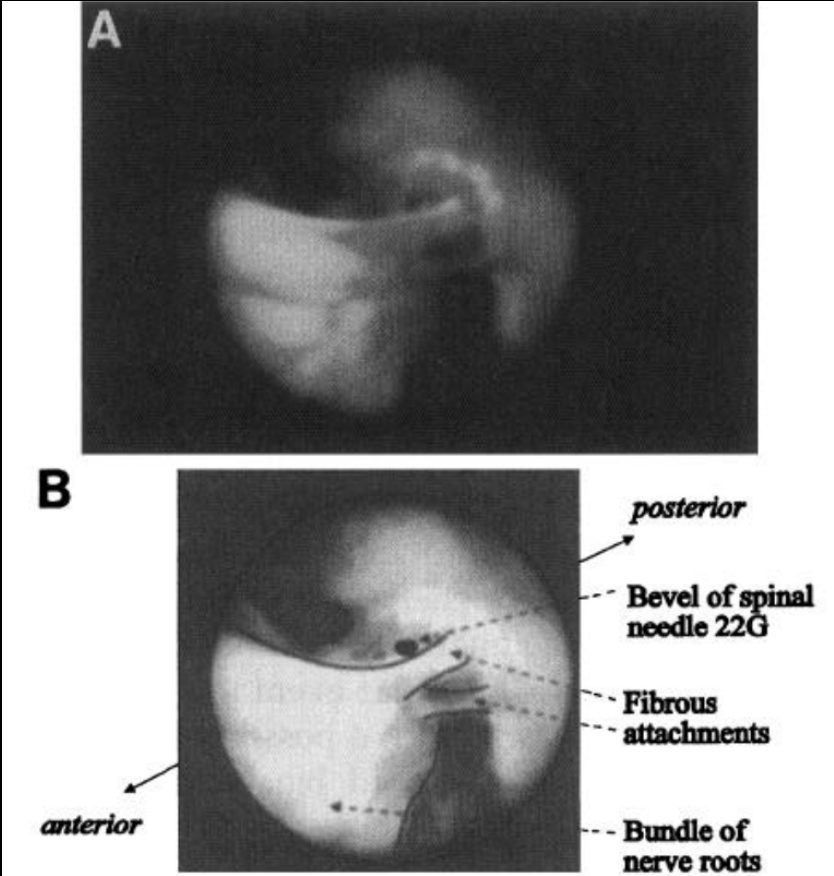
- **Tarlov cysts**
 - Not exceptional cause of failure
 - Some suggest that it's an argument for systematic MRI in case of unexplained failure .

Popham BJA 2009

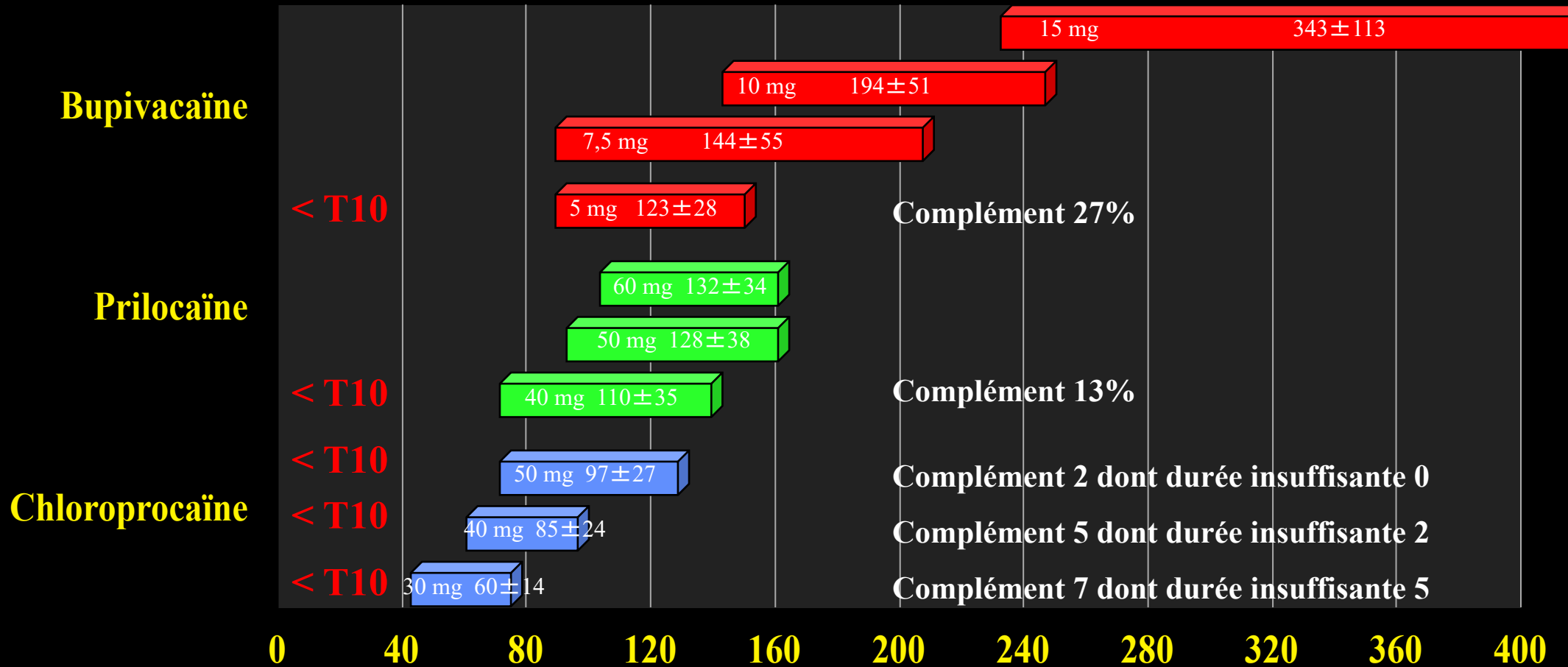


Fibrous Structures in the Subarachnoid Space: A Study with Spinaloscopy in Autopsy Subjects

Rune G. Blomberg, MD, PhD
(Anesth Analg 1995;80:875-9)
Department of Anesthesia, Central Hospital, Norrköping, Sweden

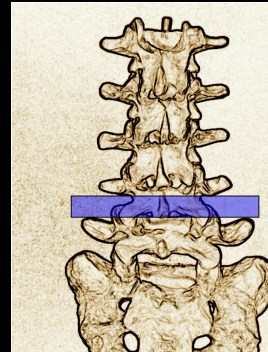


Quel produit ?



Ben David Anesth Analg 1996
 Hampl Anesthesiology 1998
 Camponovo Anesth Analg 2010
 Casati Anesth Analg 2006

Durée du bloc sensitif



Au total !

