

Information about

# Upper Limb Nerve Block



This leaflet is for people who are considering having an upper limb nerve block as part of their anaesthetic for arm or shoulder surgery. You may have the nerve block on its own for surgery, as it will make your arm numb, or in combination with general anaesthetic or sedation.

## What is a nerve block?

A nerve block is an injection of a local anaesthetic medicine to numb the nerves supplying a particular part of the body, such as the arm or shoulder. It works by preventing pain signals from reaching the brain and produces a loss of feeling which is used to control and prevent pain. This allows certain procedures to take place comfortably.

## Benefits of surgery with only a nerve block

- You can avoid having general anaesthesia and its side effects.
- Your immediate recovery will be shorter meaning you can eat, drink, move round and go home quicker.
- You will be back to your usual self faster, and it may reduce the risk of confusion in the elderly.
- If you have other serious medical conditions such as some heart and lung diseases, it may be a safer option for you.

## Benefits of having a nerve block and general anaesthesia

- Good pain relief.
- Reduces requirement for strong painkillers, avoiding their side effects such as nausea, drowsiness and constipation.

## Risks and how often they occur

### All blocks

- **Bleeding** or puncture of a surrounding blood vessel. We will apply pressure to stop the bleeding. This is a common side effect.

- **Infection** around the site of the nerve block.
- **Allergic** reaction to a medication.
- **Nerve block is inadequate** i.e. you need additional anaesthesia.
  - We will check the nerve block before surgery starts.
  - If the nerve block is inadequate, we will arrange an alternative form of anaesthesia; this may require further supplementary injections of local anaesthetic, sedation or a general anaesthetic.
- **Nerve damage**
  - Temporary: 1 in 10 patients may experience a patch of numbness or tingling in their arm after the block has worn off. By definition this gets better, mostly within weeks to months.
  - Permanent: this is rare, it is estimated to be in the region of 1 in 2500 – 30,000.
  - There is a risk of nerve damage with any surgery and anaesthetic, which may be related to your position or previous health issues.

### **Injection into the side of the neck**

Droopy eyelid and changes in vision, hoarse voice, difficulty in taking a deep breath in. Common and these resolve when the block wears off.

### **Injection around the collarbone**

Damage to the covering of the lung, called a pneumothorax. This allows air to enter around the lung and may lead to lung collapse; this may cause no symptoms at all or may require a tube (chest drain) to help the lung re-inflate. Uncommon, affects 1 in 1000 patients.

Serious problems are uncommon in modern anaesthesia but cannot be completely avoided. The diagram below will hopefully help put the numbers quoted into context.



## Procedure

You will have the nerve block whilst awake in the theatre suite under close monitoring. We will insert a small drip into your hand before performing the block. We can give you sedative medicines to help you relax during the procedure. After cleaning the area with an antiseptic, we inject local anaesthetic to numb the skin - occasionally some patients find this a little uncomfortable and if so, we can give you painkillers through the drip.

- To accurately locate the nerves, we use an ultrasound machine and/or a small machine which may make your shoulder, arm or chest twitch; this is an odd but painless sensation.
- Depending on your surgery, we will place the injection into the side of the neck, near the collarbone or in the armpit.
- We can block other nerves near the elbow, forearm or wrist.
- Some nerve blocks may require more than one injection.
- Your anaesthetist may insert a small plastic tube (catheter) around the nerves; we can use this to give you continuous pain relief for some days after your surgery.

Nerve blocks take around 20-40 minutes to work. Your arm will feel warm and tingly before feeling heavy and numb. You may be unable to move it and it will feel like it does not belong to you. We will check the block before surgery starts.

## During the Surgery

There will be around five to eight people in theatre preparing for your surgery and a member of the anaesthetic team will be with you throughout. There will be a screen between you and the surgeon. You can request sedation or music to help you relax – please ask in advance if you would like to bring your own headphones or devices into theatre. During the surgery, you may feel sensations of movement and pressure, but you should not feel pain. If at any point you are uncomfortable, let the anaesthetist know so that they can give you appropriate medications.

## After the Surgery

- Your arm will be numb for 12-24 hours.
- We advise you to wear loose clothes without buttons or zips.
- If the block lasts more than 48 hours or you have unexplained shortness of breath you should get medical advice.
- As it wears off you may feel pins and needles.
- Depending on the surgery, it is normal to feel discomfort when the anaesthetic wears off but we will give you instructions and painkillers to take home.
- **It is very important to start taking painkillers as instructed before the nerve block wears off.** This reduces any discomfort when the anaesthetic wears off.

## Looking after your numb arm

- We will give you a sling to help protect your arm.
- Do not sleep on your numb arm.
- Do not drive or operate machinery or domestic appliances.
- Avoid over extension of joints and awkward positions.
- Do not attempt to lift anything with your numb arm.

- You will be unable to feel temperature, pain or pressure so avoid extremes of temperature, fire and constant pressure.

## Other options

It is always possible to have a general anaesthetic without a nerve block. Your anaesthetist will be able to discuss these options with you and help you compare the risks of a general anaesthetic to a nerve block. They will also be able to offer advice as to which would be the safest option for you and what the benefits are of each option. You will always have a choice.

## Useful resources

Video produced by the specialist society in regional anaesthesia for patients

<https://www.ra-uk.org/index.php/patient-info-video>

Leaflet on risks associated with nerve blocks

[https://www.rcoa.ac.uk/sites/default/files/documents/2020-05/10-NerveBlocks2020web\\_0.pdf](https://www.rcoa.ac.uk/sites/default/files/documents/2020-05/10-NerveBlocks2020web_0.pdf)

Leaflet providing more information on your patient journey and types of anaesthetic

<https://www.rcoa.ac.uk/sites/default/files/documents/2020-05/02-YourAnaesthetic2020web.pdf>

## Contact numbers

If you have any concerns regarding your nerve block you can use the contact numbers below in working hours. Outside these times, in an emergency you should get medical attention via NHS 24 on 111 or attend the emergency department.

### Same Day Admissions GRI

 **0141 201 5374** (8am to 4:30pm) Monday to Friday)

### Day Surgery Stobhill

 **0141 355 1360** (8am to 5pm – Monday to Friday)

