HIP FLEXION TO INCREASE LEVEL OF SPINAL BLOCK

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Citation

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Abstract

Sir,

Trendelenberg position with hip flexion is an important rescue strategy to increase spinal anaesthetic level after spinal block. We would like to share our experience regarding the same. We have been routinely doing this maneuver in patients undergoing caesarean section and in geriatric patients where we find it very effective. In our practice when the desired spinal block is not achieved we flex the hip and knee and bring the thighs over the abdomen and have observed that with this maneuver the level of block improves at least by 2-3 segments.¹

This is of great importance especially for patients undergoing caesarean section under spinal anaesthesia where small volume of local anaesthetic is used. Here we are careful that the thighs do not compress the abdomen. In some patients we put the patient in a hip flexion and raise the upper thoracic spine with pillow support to avoid a higher spinal block level that may lead to higher incidence of

hypotension and

bradycardia. Use of narcotics along with LA for spinal block in patients undergoing

caesarean section is advocated to minimize the dose of LA thus avoiding hypotension

associated with spinal block, but in developing country like ours where narcotics like

fentanyl, sufentanil, etc are not easily available, hip flexion maneuver is very useful

Further prospective studies can be taken up with defined angle of

flexion at the hip and angle of trendelenberg position to achieve best spinal block level with minimal haemodynamic effects.

References

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