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PROCEDURE NAME

Superior Hypogastric Plexus Block +Pulsed Radiofrequency Treatment

PROCEDURE CODE

5612

INTRODUCTION

This leaflet will provide you and your relatives with information about Superior Hypogastric Plexus block. It includes information on the treatment, the risks and benefits of the procedure involved.

PELVIC PAIN AND SUPERIOR HYPOGASTRIC PLEXUS BLOCK

The hypogastric plexus is a bundle of nerves near the bottom and front of your spines. Blocking these nerves carrying pain information from upper pelvis can be used to treat your chronic pelvic pain. It can help reduce pelvic pain from endometriosis, irritable bowel syndrome, radiation injury and cancer in the pelvis. Nerves from several parts of the lower abdomen and pelvis pass through this plexus. That includes nerves from the following organs:

- Bladder or urethra
- Lower intestines
- Uterus, ovaries, or vagina
- Prostate, testicles, or penis

BENEFITS

You will get immediate pain relief if your pelvic pain is relayed by the concerned plexus of nerves. Your pain may return a few hours later as the anaesthetic wears off. Longer term relief usually begins in two to three days, once the steroid /phenol/alcohol begins to work.

For some, the relief lasts weeks. For others, the relief lasts years. If the pain returns, you can have another hypogastric plexus block.

SIDE EFFECTS/RISKS

Superior Hypogastric Plexus Block is generally safe. Some possible risks of the procedure are:

- Temporary drop in blood pressure
- Damage to nearby nerves
- Damage to the spinal cord
- Damage to nearby organs
- Damage to nearby blood vessels
- Bleeding
- Infection
- Allergic reaction to the medicines

Steroid medicine can cause side effects. These include temporary increases in blood sugar levels for 1 to 2 days, an allergic reaction, and flushing of your face. There is also a risk that the procedure will not ease your pain.

You may not be able to have the procedure if you have a high risk of bleeding or if you have an infection in the region of the injection. Your own risk may vary based on your age and other health problems.

BEFORE THE PROCEDURE

- You will be required to fast for 6 hours prior to your admission from food.
- You will be required to fast for 2 hours prior to admission from water.
- Take your normal medications on the morning of your procedure.
- Please contact my office immediately if you are currently taking blood thinners such as Xarelto (Rivaroxaban), Eliquis (Apixaban), Plavix (Clopidogrel), Pradaxa (Dabigatran) or if you are pregnant.
- Please also advise if you are taking any diabetic medication.
- Upon admission, the procedure will be discussed with you again and you will be asked to sign a consent form.

THE PROCEDURE (15-20 MINUTES)

- This is carried out in the theatre while you are awake.
- You may be offered sedation through an injection into the back of your hand to help you to relax.
- Your injection site will be cleaned with an antiseptic solution. Sterile sheets will then be placed around the area. A local anaesthetic will be injected to numb the area.



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- X-ray / ultrasound will be used to ensure proper positioning of the injecting needle. You may feel a bit of pressure and a stinging in the area. Dye will be used to confirm the correct position of the needles and before administration of medications which will normally include a steroid for longer-term relief and sometimes alcohol or phenol.
- Application of Pulsed Radiofrequency could give you additional benefit.
- If you feel any discomfort during the procedure, please tell a member of the theatre team.
- Once completed, a plaster will be placed over the injection site, and you will then be taken to the recovery area.

AFTER THE PROCEDURE

- In the recovery area, you will be observed for 30 to 60 minutes.
- You need to have somebody to accompany you home.
- Do not stop your usual pain killers.
- The plaster can be removed after 24 hours, and you can then have a bath or shower as normal. Before the plaster is removed, avoid getting the injection site wet.
- Re-engage in physical activities as soon as you can.
- You will be contacted about a follow-up appointment for 4-6 weeks' time, or you can book directly by visiting <u>www.drdeborahgalvin.ie</u>

Please report immediately to your GP / my office or attend the Emergency Department if you have serious concerns outside office hours.