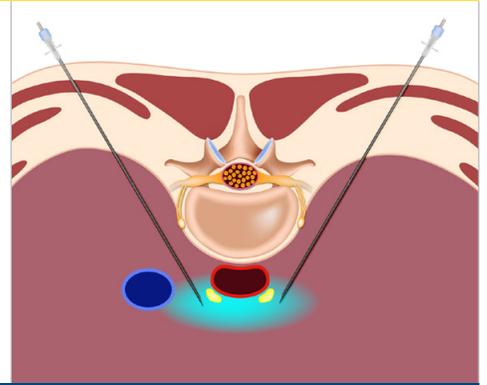


Celiac Plexus Block



Celiac plexus blocks are intended to reduce abdominal pain, often due to cancer or chronic pancreatitis.

Duration

This procedure typically lasts under 30 minutes and the patient is able to return home the same day.

How is it performed?

You will be taken to the procedure area and positioned on your stomach. A Celiac plexus block is an injection of steroid and local anesthetic, given to block a plexus or nerves surrounding the aorta (a major artery in the chest). This block is performed for the diagnosis and treatment of abdominal pain. These nerves carry pain signals from the abdomen to the brain and spinal cord.

Temporarily blocking or disrupting the pain impulses of these nerves can result in varying degrees of pain relief. If, after a single block, you achieve partial relief, a series of blocks can be done followed by a neurolytic block, typically using chemical neurolysis.

Prior to your appointment

You will have the option of receiving no sedation or:

- oral sedation – or –
- intravenous sedation

If choosing sedation, you must not eat for six hours or drink anything for four hours before the procedure.

You may continue taking all medications except blood thinners before the procedure.

Please see your medication handout to determine when to hold and resume your blood thinner or ask your doctor.

[more on back](#) ▶

Conditions treated

You may benefit from a celiac plexus block if you suffer from:

- Chronic pancreatitis
- Pancreatic cancer
- Chronic abdominal pain

To schedule a procedure

Please contact the nurse navigators to schedule any procedure.

- for McCullough-Hyde Ross Medical Center, call 513 246 7182*
- for Good Samaritan Hospital and Bethesda Surgery Center, call 513 246 7958*

*Please note these numbers are for scheduling only

To ask other questions

Please call 513 246 7000. Select Option 3 three times.

Celiac Plexus Blocks

◀ continued from front

What are some of the risks and side effects?

As with procedures of this type, there is a risk of infection, bleeding, diarrhea and hypotension. Rarely, nerve damage can occur. Short-term side effects of numbness, weakness and increased pain may occur. It is common to feel discomfort at the needle puncture site. A rare risk can occur of intravascular injection, aortic dissection, medications being injected into surrounding organs and paralysis (maybe permanent) if medication spreads to the spinal cord.

Steroids will cause elevated blood sugar and can increase your blood pressure. You may also develop temporary flushing, muscle cramping, increased appetite and difficulty sleeping. This will typically resolve in 1 week but can last several weeks.

What to expect after the procedure

After the injection, you can expect to experience some pain relief. The duration of relief varies for every patient. Some patients will experience long-term relief after one injection while other patients may need additional injections. Your physician will recommend additional injections as necessary.

On occasion, the part of your body may feel slightly weak or odd for a few hours after the injection. You may notice a slight increase in your pain that lasts for several days as the numbing medicine wears off and before the cortisone takes effect. You may begin to notice an improvement in your pain 2-5 days after the injection. If you do not notice improvement within 10 days after the injection, it is unlikely to occur.

You should not drive or engage in physical activity for 24 hours following the procedure.

You may resume taking medications and regular eating habits immediately.