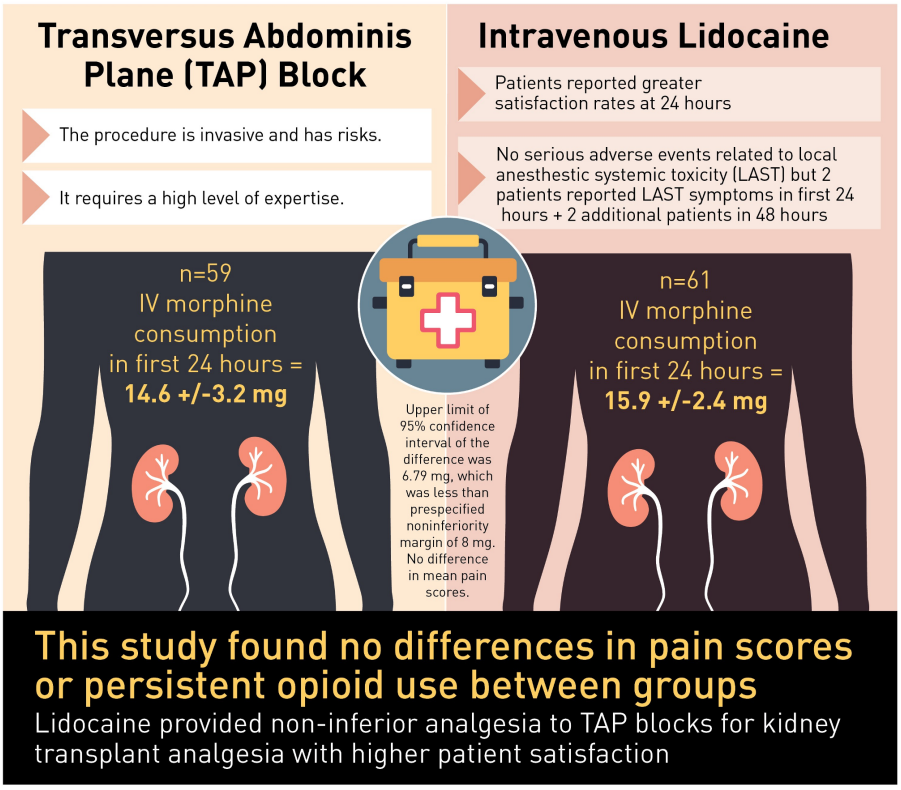
Comparison of continuous intravenous lidocaine versus TAP block for kidney transplant: an infographic

Eric S Schwenk ,[1] Rajnish K Gupta [2]

SUMMARY

As Hanson *et al*[1] described in their recent study, renal transplant surgery can be associated with moderate to severe pain. Transversus abdominis plane (TAP) blocks can provide effective postoperative analgesia but require expertize in regional anesthesia and can lead to some complications. In this prospective, randomized, unblinded noninferiority study of lidocaine infusion versus TAP block for renal transplant, 120 patients were assigned one of the two interventions. The primary outcome was opioid consumption during the first 24 postoperative hours. Lidocaine infusion was noninferior to unilateral, single-shot TAP block in providing postoperative analgesia after renal transplant. Patient satisfaction scores were higher for lidocaine infusion group, but two patients described local anesthetic systemic toxicity symptoms in the first 24 hours with lidocaine and two more patients reported symptoms at the 48-hour time point in the lidocaine group. The authors concluded that a lidocaine infusion may be an effective alternative to a TAP block when it is contraindicated or when the necessary skills are not available.



Ref: Hanson NA, Strunk J, Cowan NG, et al. Comparison of continuous intravenous lidocaine versus transversus abdominis plane block for kidney transplant surgery: a randomized, noninferiority trial. *Reg Anesth Pain Med* 2021; doi: 10.1136/rapm-2021-102973. Infographic by Jim Snively

Regional Anesthesia & Pain Medicine

[1]Department of Anesthesiology, Sidney Kimmel Medical College at Thomas Jefferson University, Philadelphia, Pennsylvania, USA
[2]Department of Anesthesiology, Vanderbilt University Medical Center, Nashville, Tennessee, USA

Correspondence to Dr Eric S Schwenk, Anesthesiology, Sidney Kimmel Medical College at Thomas Jefferson University, Philadelphia, Pennsylvania, USA; prepdrum@gmail.com

Twitter Eric S Schwenk @ESchwenkMD and Rajnish K Gupta @dr_rajgupta

Acknowledgements We would like to acknowledge Jim Snively, artist, of Pittsburgh, PA, for creation of this infographic.

Contributors ESS designed the infographic and RKG helped edit and approved the infographic.

Funding The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests None declared.

Patient consent for publication Not required.

Provenance and peer review Commissioned; internally peer-reviewed.

To cite Schwenk ES, Gupta RK. *Reg Anesth Pain Med* 2021;**46**:954.

Received 20 August 2021
Accepted 21 August 2021
Published Online First 27 August 2021

Linked

► http://dx.doi.org/10.1136/rapm-2021-102973

Reg Anesth Pain Med 2021;**46**:954.
doi:10.1136/rapm-2021-103095

ORCID iDs
Eric S Schwenk http://orcid.org/0000-0003-3464-4149
Rajnish K Gupta http://orcid.org/0000-0003-3401-4737

REFERENCE

1 Hanson NA, Strunk J, Saunders G, *et al*. Comparison of continuous intravenous lidocaine versus transversus abdominis plane block for kidney transplant surgery: a randomized, non-inferiority trial. *Reg Anesth Pain Med* 2021;46:955–9.