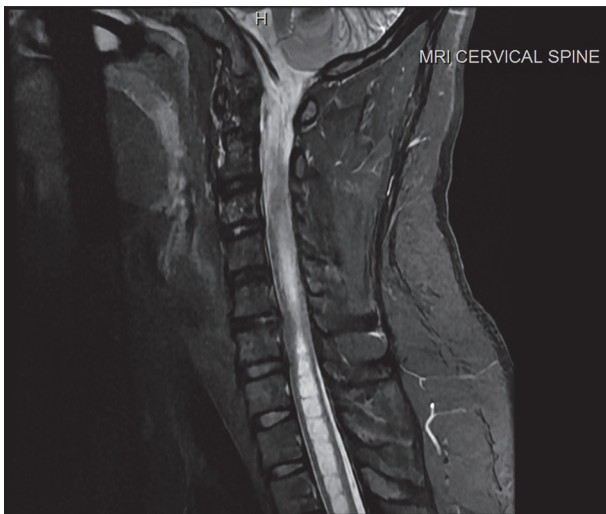


Abstract #36063 Figure 1 Tumor



Abstract #36063 Figure 2 Cervical spine MRI



Abstract #36063 Figure 3 Thoracic spine MRI

**Conclusions** Spinal cord ependymoma is a rare tumor and surgical resection has been established as first-line treatment and can be curative. This case illustrates that a complete spinal

MRI is advisable when symptoms partially match the anatomic location but not the cause.

Attachment tumor.jpg

### #36427 TREATMENT OF NEUROPATHIC PAIN IN THE IMMEDIATE POSTOPERATIVE PERIOD WITH PERINEURAL CATHETER

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Please confirm that an ethics committee approval has been applied for or granted: Not relevant (see information at the bottom of this page)

**Background and Aims** Continuous peripheral nerve blocks are an alternative for analgesia in situations where a single dose of local anesthetic is insufficient. There are numerous indications for this type of block, including phantom limb pain.

**Methods** We present the case of a 35-year-old man, with no medical history of interest, who suffered trauma in the left arm with multiple fractures and section of the left brachial artery. Supracondylar amputation of that arm was performed. In the immediate postoperative period, the patient presented intense pain (VAS scale of 8 that did not respond to NSAIDs or intravenous opioids) of the upper extremity, for which it was decided to place a supraclavicular catheter with continuous infusion of 0.2% ropivacaine, with good pain control, associated with intravenous analgesia. 24 hours later, the patient reported a sensation of phantom limb pain in the amputated region, so 300 mg of Gabapentin were added to the treatment.

**Results** Phantom limb pain appears in up to 80% of amputee patients. 75% of patients who develop it do so in the first week after amputation. Perineural blocks have been described as a good alternative for the treatment of phantom limb pain, as well as for acute pain after amputation surgery.

**Conclusions** Despite the numerous interventions that are proposed for the treatment of phantom limb pain, there is no single treatment that is completely effective, which is why multimodal treatment is necessary. Disabling phantom limb pain usually decreases in intensity over time, so an early approach allows better pain control in its early stages.

### #36470 HIP DENERVATION FOR CHRONIC PAIN MANAGEMENT DUE TO CONGENITAL HIP DISLOCATION

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10.1136/rapm-2023-ESRA.356

Please confirm that an ethics committee approval has been applied for or granted: Not relevant (see information at the bottom of this page)

**Application for ESRA Abstract Prizes:** I apply as an Anesthesiologist (Aged 35 years old or less)

**Background and Aims** Congenital hip dislocation (CHD) is caused by abnormal formation of the hip joint during early