



**Abstract #36455 Figure 3** All equipment was repositioned due to the patient's position

**Conclusions** The supraclavicular brachial plexus block is rationale choice for elbow surgery. However, due to anatomical deformities and proximity to the lungs the IBPB was chosen. The provided postoperative analgesia prevented opioid consumption and reduced the risk of pulmonary complications in this patient. The regional anesthesia applications can improve outcomes in high risk patients like OI.

**Attachment** patient consent.jpg

**#35797** **ERECTOR SPINAE PLANE BLOCK IN PATIENTS WITH ACUTE LOW BACK PAIN**

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**Please confirm that an ethics committee approval has been applied for or granted:** Yes: I'm uploading the Ethics Committee Approval as a PDF file with this abstract submission

**Application for ESRA Abstract Prizes:** I don't wish to apply for the ESRA Prizes

**Background and Aims** One of the commonest causes of disability. Acute low back pain (ALBP) is a real public health problem. It requires a multimodal management to maintain physical activity. We present our experience with the use of erector spinae plane block (ESPB) in ALBP.

**Methods** After informed consent, 30 patients with atraumatic ALBP had an uni or bilateral ESPB . After a sterile

preparation of the skin, a linear covered probe was placed parasagittally to the spine. An in plane injection of 20 ml of a mixture of ROPI 0,2% & 10 mg of DEXA was performed the closest to the trigger point described by the patient. We 've noted Pain scores using visual analogue scale (VAS) and degree of functional disability using the OSWESTRY Disability Index (ODI) at admission ,30 minutes & the seventh day post procedure. All patients were discharged with a prescription of analgesics (paracetamol , Non-steroidal anti-inflammatory drugs and oral morphine as rescue (in case of VAS over 03).

**Results** In this prospective observational study mean age was 50 years. Sex ratio was about 1.5 male for every one female only one patient had a bilateral ESPB .Pain & Oswestry index scores are expessed in table 1.

**Abstract #35797 Table 1**

	Admission	30 minutes post block	7 th day post procedure
<b>VAS (mean)</b>	07	03	02
<b>OSWESTRY index</b>			
Crippled	3.3 % (1)	00	00
Severe disability	33.3 % (10)	00	00
Moderate disability	63.3 % (19)	3.3 % (1)	3.3 % (1)
Minimal disability	00	96.6 % (29)	96.6 % (29)

**Conclusions** ESPB seems to have a beneficial effect in reducing pain & functional disability in patients with ALBP.

**Attachment** CHPrivas\_Avis\_ETHIQUE\_V10052023.pdf

**#35964** **REGIONAL ANAESTHESIA RESOLVED THE PROBLEM AND CANCELLED AN ELECTIVE SURGERY!!!**

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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)

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

**Background and Aims** 31yr old male got admitted to the hospital with complaints of inability to extend the left forearm completely. It was sudden in onset and present since last 6months. There was no previous history of trauma. Patient did not have any other habits or comorbid conditions. On examination, patient was unable to extend his left forearm completely (180 degrees) due to restricted movement at the left elbow (110-120 degrees). For the same condition, he was posted for elective left elbow arthrolysis surgery.

**Methods** On the day of surgery, patient was shifted to operation room, monitors connected and IV cannula secured. In supine position, left side of the neck, supra and infraclavicular area was painted and draped. Left ultrasound-guided left supraclavicular brachial plexus block was given using 20ml of 0.5% bupivacaine.

**Results** Post block after 15minutes, patient left upper limb was adequately blocked for surgery and patient was unable to move his limb for surgery. The patient at this time noticed complete extension of his left upper limb and he asked the surgeon to postpone the surgery. On follow up next day, once the effect of block had recovered, patient was able to