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The clinical study of cervical epidural analgesia for cervical spondylopathy

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Aim of investigation: To observe the effect of cervical epidural injection of lidocaine and Triamcinolone Acetonide mixture solution to treat the cervical spondylopathy

Methods: 2460 cases were treated during 1992~2001 year. Male 1347 cases, female 1113 case. Nerve root type 1653 vatebral arterial type.321, Sympathetic type 316, cervical spondilotic myopathy type (CSM) 170. the patient is placed in the lateral position with the spine and neck to open up the internaminar space so make it easier to enter the epidural space. The tuohy needle is inserted into the midline in a slightly cephalad direction with it's bevel directed, laterally. Puncture at levels between C₆~7 or C₇~Th₁, median puncture is the easiest to use .1% Lidocaine and Triamcinolone Acetonide (2mg/ml) mixture solution 6~8ml is injected into space single.

Results: Nerve root type, excellent 81.36%, good 15.48%, poor 3.14%. Vatebral arterial type, excellent 61.05%, good 23.36%, poor 15.57%. Sympathetic type, excellent 64.24%, good 23.41%, poor 12.34%. CSM, excellent 21.29%. good 30.58% poor 44.11%.

Conclusions: Cervical epidural injected Lidocaine and Triamcinolone Acetonide is a good method for treatment of cervical spondylopathy in the non-operative management. Epidural injection is the popular method in anesthetic clinic, but cervical epidural puncture is a difficulty and dangerous technique, so the operator must be mastered of anesthesiologist for safety.

Key words: Cervical spondylopathy, Epidural injection, Triamcinolone Acetonide.

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