

Anesthesia for Breast Surgery

For breast sentinel node or axillary node surgery, your surgeon will often request a nerve block for anesthesia. When patients receive a nerve block for anesthesia they often receive sedation during the surgery. But, they may also receive general anesthesia. The decision whether to have sedation or general anesthesia is based on the type of surgery and on your medical problems.

The type of nerve block offered for breast and lymph node surgery is called a **thoracic paravertebral nerve block**.

What is a nerve block?

A nerve block means that numbing medicine is placed near nerves that provide feeling to a certain part of the body. For example, the dentist does a nerve block to numb your mouth for dental work.

What is a thoracic paravertebral nerve block?

A thoracic paravertebral block involves injecting numbing medicine in the space off to the side of your spine. The nerves that provide feeling to your chest wall, breast, and axilla (arm pit) are located along your back, just below your neck. We most often place 2 or 3 injections to get all the nerves that provide feeling to your chest wall.

What are the benefits of a nerve block?

By placing nerve blocks we reduce the need for narcotic pain medicine during your surgery. This reduces the amount of time it takes you to wake up. It decreases your risk for nausea and vomiting. A breathing tube and general anesthesia are often not needed. This decreases possible breathing problems. Research also shows that using nerve blocks for surgery will speed your recovery time by a number of hours. As a rule, you will not need pain medicine for up to 12 hours after a nerve block because the surgery site remains numb.

What are the risks of a nerve block?

There is always risk to any medicine or procedure. In the case of thoracic paravertebral nerve blocks the specific risks are the ones listed below.

- Bleeding caused by the needle
- Infection started by the needle
- Nerve damage caused by the needle
- Damage caused to your lung
- Numbing effect spreads to the other side of your body (epidural spread)
- For a time, you may have a droopy eyelid or weak arm

We take many steps to keep these blocks as safe as possible. These steps include the use of ultrasound for placement of the injections when possible. In most cases, the benefits outweigh the risks. We will discuss this with you on the day of surgery. These blocks have been done very successfully at this hospital for many patients who are having breast and lymph node surgery.

The day of surgery

1. You will arrive in pre-surgery area. You will change into a gown. A nurse will review your health history and surgery plan. Some patients will go to nuclear medicine or the breast center for other procedures.
2. When you return, you will see an anesthesiologist. He or she will talk to you about your health and anesthesia choices for the day. If you choose to have a nerve block, you will meet the block nurse. The nurse will talk to you about your health. The nurse will take you back to a special room where the nerve blocks will be placed.
3. If you choose to have a nerve block, you will be made sleepy with intravenous medicine. An ultrasound machine will be used to help guide the injections in your back. Your skin will be numbed at each injection site. When the nerve block is complete, you will go to the operating room. We will confirm your name, birth date, and procedure. You will receive medicines that will allow you to sleep during the surgery. Once the operation is over, you will wake up. You will return to your room. You will be able to go home once you have met certain standards.
4. If you choose to have general anesthesia you will go to the operating room from your pre-op room. We will confirm your name, birth date, and procedure. You will have intravenous medicine to make you fall asleep. You will have a breathing tube placed. You will remain unconscious during the surgery. At the end of your surgery, we will wake you up. The breathing tube will be removed. You will go to the recovery room. Here you will continue to wake up. You will receive any treatment you need for pain or nausea. After this recovery time, you will return to your room. You will be able to go home or to your hospital room once you have met certain standards.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright ©1/2014. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7154