

Long-Acting Proximal Intercostal Nerve Block for the Management of Intercostal Neuralgia in the Third Trimester of Pregnancy

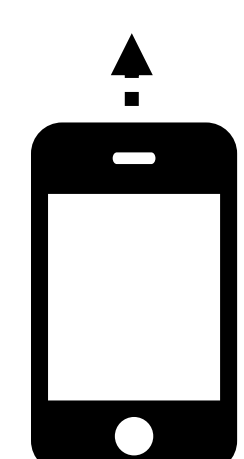
 Bridget Marcinkowski, MD¹; Mariana Restrepo-Holguin, MD¹; Alexander Stone, MD¹
¹Department of Anesthesiology, Brigham and Women's Hospital, Boston, MA

INTRODUCTION

- Intercostal neuralgia can cause neuropathic thoracic pain in pregnancy
- Many analgesics, including those most effective for neuropathic pain, are rated Class C or D in pregnancy

CASE REPORT

- 32F @ 35wk GA with unilateral lower mid-axillary rib pain x7d > non-pharmacologic interventions, acetaminophen, & oxycodone were minimally effective
- Single shot proximal intercostal nerve block (PICB) was performed with 25 mL of 0.25% bupivacaine + 4 mg of dexamethasone
- Pain completely resolved & patient was discharged



Scan QR code to
view the full abstract

Proximal intercostal nerve blocks provide rapid, sustained **pain relief** for intercostal neuralgia **in pregnancy.**

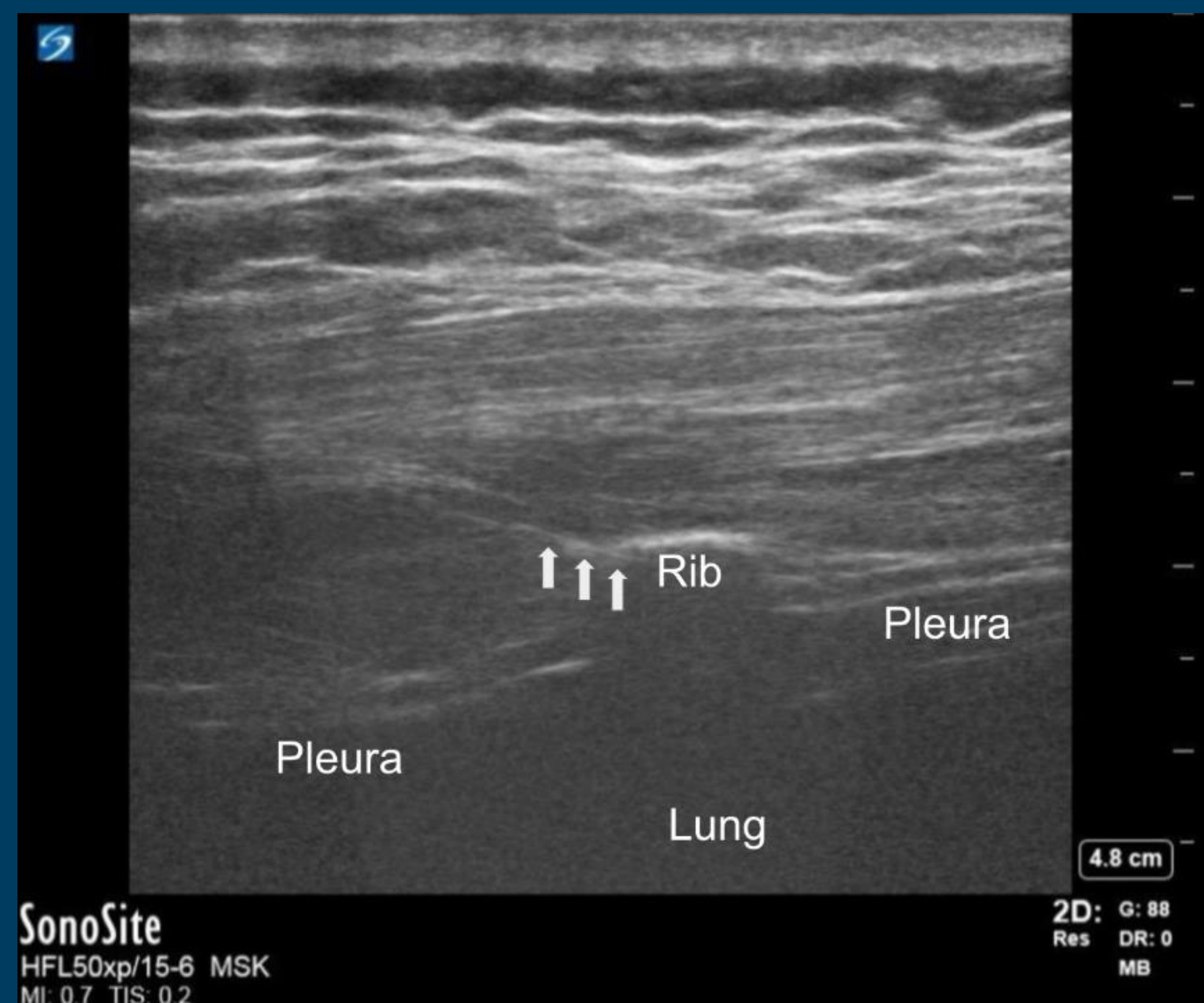


Figure 1: Ultrasound image of the proximal intercostal nerve block. The needle (arrows) is seen piercing the external intercostal muscle with the tip just deep to the internal intercostal membrane at the caudal border of the tenth rib.

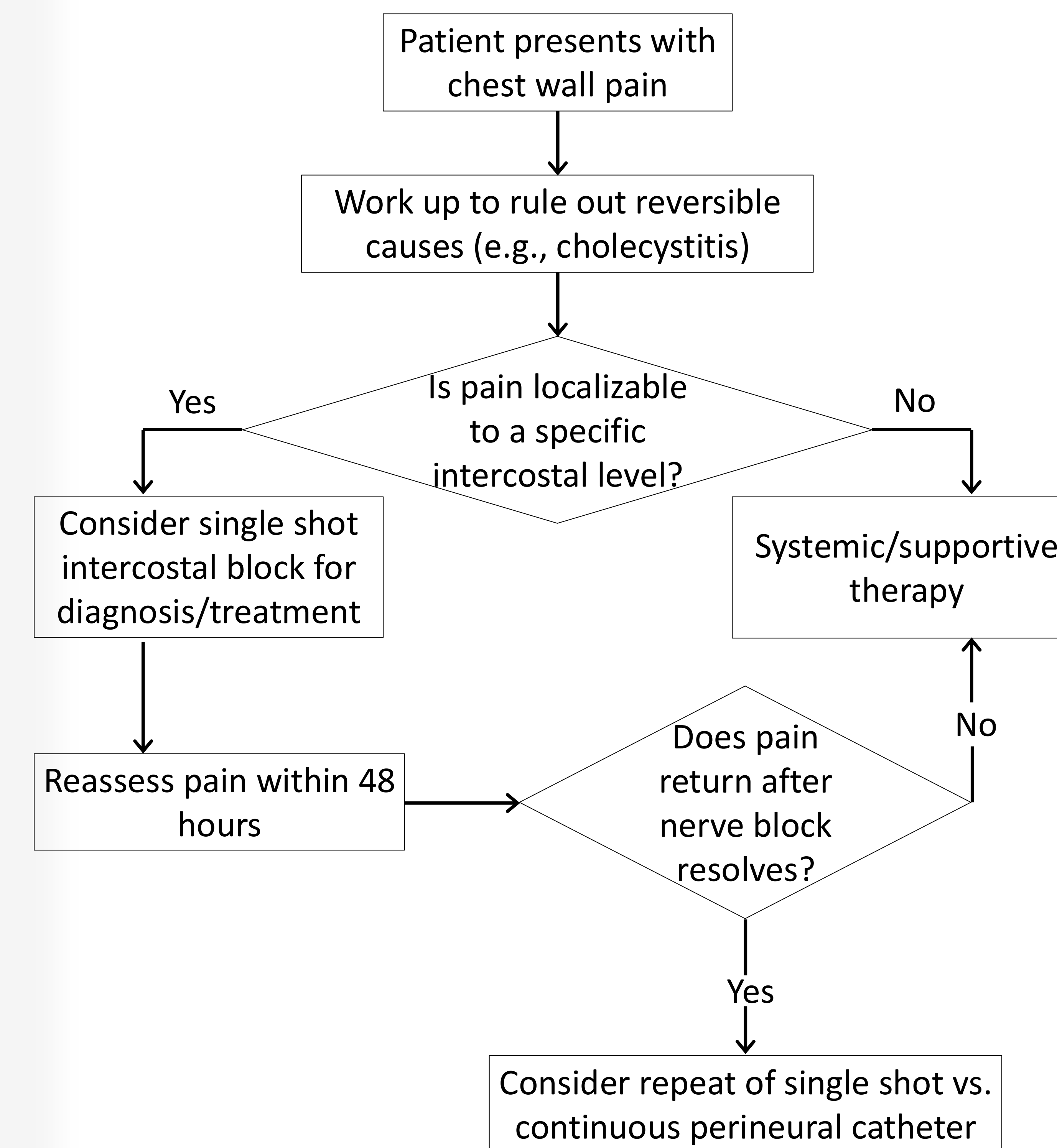


Figure 2: Schema for an acute pain team approach to treating intercostal neuralgia

DISCUSSION

- PICBs may reduce opioid exposure, prevent unnecessary hospitalization, & improve patient comfort while limiting fetal exposure to systemic analgesics