

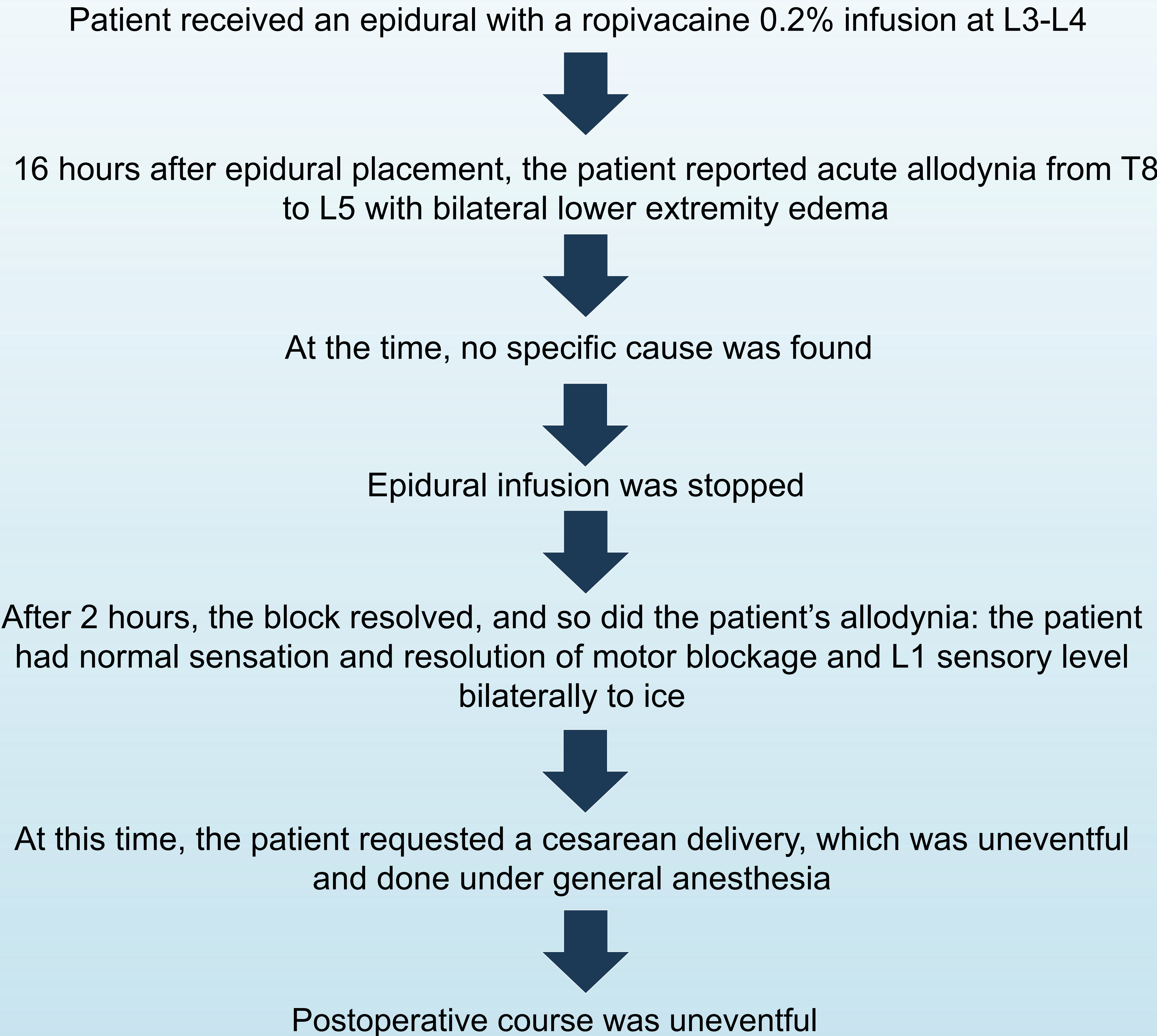
Background

- Allodynia (pain due to a stimulus that does not usually provoke pain) is a type of neuropathic pain with unknown etiology .¹
- It's a neurological complications related to spinal epidural anesthesia in about 0.02% of patients.²
- Ropivacaine is less lipophilic than bupivacaine. This reduced lipophilicity is associated with decreased potential for central nervous system and cardiac toxicity.³
- We describe a case of allodynia in a high-risk parturient following ropivacaine epidural exposure.

Case Presentation

- A morbidly obese 35-yo G3P1 38w5d with class B diabetes admitted for a trial of labor after cesarean.
- On preoperative evaluation she reported no prior history of anesthetic complications.

Timeline of Events



Discussion

- Ropivacaine is a long-acting amide local anesthetic commonly used for surgical anesthesia and analgesia.
- Although rare, ropivacaine has the potential to cause nerve irritation or local nerve toxicity.
- The patient presented with acute bilateral allodynia and edema after 16 hours of plain ropivacaine epidural infusion, which fully resolved after discontinuation.
- Our case highlights the importance of frequent evaluation for abnormal symptoms and the discontinuation of epidural anesthetics following signs of chemical nerve irritation or possible local toxicity.

References

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