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Clavipectoral plane block as a sole anesthetic technique for clavicle surgery - A case report

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Background: The clavipectoral fascia plane block was introduced by Dr. Luis Valdes in a symposium at the 2017 European Society of Regional Anesthesia and Pain Therapy Congress.

Case: Clavipectoral plane block (CPB) with intravenous sedation provided surgical anesthesia and analgesia in a 39-year-old male patient with a right midshaft clavicle fracture. This in-plane technique was used to deposit 30 ml of a local anesthesia mixture between the clavipectoral fascia and periosteum on both the medial and lateral sides of the fracture line.

Conclusions: Excellent anesthesia and analgesia for up to 16 h post-block were provided by CPB during the clavicle surgery.

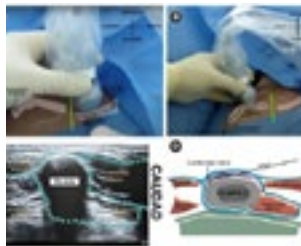


Figure 1: (A) Scanning the clavicle medial to the fracture line. (B) Scanning the clavicle lateral to the fracture line. (C) Sonoanatomy of the clavicle and its surrounding structures (dotted lines show the clavipectoral fascia). (D) A schematic illustration showing the surrounding structures of the clavicle and the local anesthesia deposition during the clavipectoral plane block.

Recent Publications:

1. Rivera AS, Lam HY, Macalino JU. Epidemiology of Injuries in the Philippines: An Analysis of Secondary Data. *Acta Med Philipp* [Internet]. 2018Apr.30 [cited 2022Jul.2];52(2).
2. Qin, Miao MSa; Zhao, Shishun PhDa; Guo, Wenlai PhDb; Tang, Li MSa; Li, Hangyu MSa; Wang, Xuejie MSb; Zhu, Zhe PhDb, Sun, Tianwen PhDc, Open reduction and plate fixation compared with non-surgical treatment for displaced midshaft clavicle fracture, *Medicine*: May 2019 - Volume 98 - Issue 20 - p e15638 doi: 10.1097/MD.0000000000015638
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