



Anaesthesia

Combined segmental spinal epidural for major spine surgery: a case report



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Abstract

A woman in her mid-50s, hesitant about general anaesthesia due to a difficult airway, opted for neuraxial anaesthesia for L4 laminectomy with pedicle screw fixation (L3–L5). Preoperatively, she received 150 µg buprenorphine and 1 mg midazolam. In lateral position, a T8–T9 epidural catheter was placed, followed by segmental spinal anaesthesia (2.5 mL 0.5% hyperbaric bupivacaine+30 µg clonidine) at T10–T11. Prone positioning was executed using standard techniques. During the 6–7 hours surgery, three 7 mL epidural top-ups (2% lignocaine epinephrine) were administered at 90 min intervals. Haemodynamics remained stable with 2.5 L crystalloids, 350 mL packed red cells and three ephedrine doses (6 mg each). Sedation included 150 µg buprenorphine and two 1 mg midazolam doses. Postoperatively, she received epidural 0.25% bupivacaine for 2 days, systemic analgesics and was discharged on the sixth day.

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