About Your Celiac Plexus Block Procedure

This information will help you prepare for your celiac plexus block procedure at Memorial Sloan Kettering (MSK), including what to expect before, during, and after your procedure.

The celiac (solar) plexus is a group of nerves in your abdomen (belly). It sends pain messages to your brain. These pain messages are sent from your:

- Pancreas
- Liver
- Kidneys
- Gall bladder
- Spleen
- Bowels (intestines)

The Celiac Plexus Block Procedure

A celiac plexus block is an injection (shot) of a medication that stops these nerves from feeling pain. This can help treat pain in your upper abdomen. Your doctor may recommend that you have a celiac plexus block if you:

- Have side effects from common pain medications.
- Don’t get enough pain relief from common pain medication(s).

While problems with the celiac plexus block are rare, they may include:

- Injury to major blood vessels, nerves, or your kidneys.
- Partial collapse of your lung.
- Injection of the nerve block medication into a blood vessel.
- Weakness in your legs.
- Bowel or bladder problems.
- Allergic reactions to medications or dye used during the procedure.

Your doctor will discuss these with you before your procedure.

**Before Your Procedure**

**Ask about your medications**

You may need to stop taking some of your medications before your procedure. Talk with your doctor about which medications are safe for you to stop taking. We have included some common examples below.

**Anticoagulants (blood thinners)**

If you take a blood thinner (medication that affects the way your blood clots), ask the doctor performing your procedure what to do. Their contact information is listed at the end of this resource. Whether they recommend you stop taking the medication depends on the reason you’re taking it.

**Do not stop taking your blood thinner medication without talking with your doctor.**

<table>
<thead>
<tr>
<th>Examples of Blood Thinners</th>
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<tbody>
<tr>
<td>apixaban (Eliquis®)</td>
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<td>dalteparin (Fragmin®)</td>
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<tr>
<td>meloxicam (Mobic®)</td>
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<td>ticagrelor (Brilinta®)</td>
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<td>aspirin</td>
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<td>dipyridamole (Persantine®)</td>
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<tr>
<td>nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (Advil®) or naproxen (Aleve®)</td>
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<td>tinzaparin (Innohep®)</td>
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<td>celecoxib (Celebrex®)</td>
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<td>edoxaban (Savaysa®)</td>
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<td>pentoxifylline (Trental®)</td>
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<td>warfarin (Coumadin®)</td>
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<td>cilostazol (Pletal®)</td>
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<td>enoxaparin (Lovenox®)</td>
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<td>prasugrel (Effient®)</td>
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<td>clopidogrel (Plavix®)</td>
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<td>Fondaparinux (Arixtra®)</td>
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<td>rivaroxaban (Xarelto®)</td>
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<tr>
<td>dabigatran (Pradaxa®)</td>
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<tr>
<td>heparin (shot under your skin)</td>
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<td>sulfasalazine (Azulfidine®, Sulfazine®)</td>
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Please read our resource *Common Medications Containing Aspirin and Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs)* (www.mskcc.org/pe/common_meds). It has important information about medications you’ll need to avoid before your procedure and what medications you can take instead.

**Medications for diabetes**

If you take insulin or other medications for diabetes, ask the doctor who prescribes the medication what you should do the morning of your procedure. You may need to change the dose before your procedure.

**Diuretics (water pills)**

If you take any diuretics (medications that make you urinate more often), ask the doctor performing your procedure what to do. You may need to stop taking them the day of your procedure. Diuretics are sometimes called water pills. Some examples are furosemide (Lasix®) and hydrochlorothiazide.

**Arrange for someone to take you home**

You must have a responsible care partner take you home after your procedure. Make sure to plan this before the day of your procedure.

If you don’t have someone to take you home, call one of the agencies below. They will send someone to go home with you. There’s usually a charge for this service, and you will need to provide transportation.

- **Agencies in New York**
  - Partners in Care: 888-735-8913
  - Caring People: 877-227-4649

- **Agencies in New Jersey**
  - Caring People: 877-227-4649

**Have a blood test before your procedure**

Your doctor or nurse will schedule you to have a blood test a few days before your procedure to check the cells that help your blood clot (platelets).

**Tell us if you’re sick**

If you develop any illness (fever, cold, sore throat, or the flu) before your procedure, call a nurse in Interventional Radiology at 212-639-2236. A nurse is
available Monday through Friday from 9:00 AM to 5:00 PM. After 5:00 PM, during the weekend, and on holidays, call 212-639-2000 and ask for the Interventional Radiology fellow on call.

Note the time of your appointment

A staff member from Interventional Radiology will call you 2 business days before your procedure. If your procedure is scheduled on a Monday, you will be called on the Thursday before. If you don’t receive a call by noon the business day before your procedure, please call 212-639-5051.

The staff member will tell you what time you should arrive at the hospital for your procedure. You will need to go to:

- Presurgical Center (PSC) on the 2nd floor
  1275 York Avenue
  (between East 67th and East 68th Streets)
  M Elevator to 2nd floor

If you need to cancel your procedure for any reason, please call the doctor who scheduled it for you.

Instructions for eating and drinking before your surgery

- Do not eat anything after midnight the night before your surgery. This includes hard candy and gum.
- Between midnight and up until 2 hours before your scheduled arrival time, you may drink a total of 12 ounces of water (see figure).
- Starting 2 hours before your scheduled arrival time, do not eat or drink anything. This includes water.

The Day of Your Procedure
Things to remember

- Take only the medications your doctor told you to take the morning of your procedure. Take them with a few sips of water.
- Do not apply cream or petroleum jelly (Vaseline®). You can use deodorant and light moisturizers. Don’t wear eye makeup.
- Remove any jewelry, including body piercings.
- Leave all valuables, such as credit cards and jewelry, at home.
- If you wear contact lenses, wear your glasses instead, if possible. If you don’t have glasses, please bring a case for your contacts.

What to bring with you

- A list of the medications you take at home
- Medications for breathing problems (such as inhalers), medications for chest pain, or both
- A case for your glasses or contacts
- Your Health Care Proxy form, if you have completed one
- If you use a CPAP or BiPAP machine to sleep at night, please bring your machine with you, if possible. If you can’t bring your machine with you, we will give you one to use while you are in the hospital.
Where to Park

MSK’s parking garage is located on East 66th Street between York and First Avenues. If you have questions about prices, call 212-639-2338.

To reach the garage, turn onto East 66th Street from York Avenue. The garage is located about a quarter of a block in from York Avenue, on the right-hand (north) side of the street. There is a pedestrian tunnel that you can walk through that connects the garage to the hospital.

There are also other garages located on East 69th Street between First and Second Avenues, East 67th Street between York and First Avenues, and East 65th Street between First and Second Avenues.

Where to go

Please arrive at the main building of MSK at 1275 York Avenue between East 67th and East 68th Streets. Take the M elevator to the 2nd floor. Enter through the glass doors and check in at the desk.

What to expect

Once you arrive at the hospital, doctors, nurses, and other staff members will ask you to state and spell your name and date of birth many times. This is for your safety. People with the same or similar names may be having procedures on the same day.

Your doctor will explain the procedure to you and answer any questions you may have. They will ask you to sign a consent form.

When it’s time for your procedure, your nurse will bring you to the procedure room and help you onto the exam table. A member of your anesthesia team will place an intravenous (IV) catheter into your vein, usually in your hand or arm. At first, you’ll receive fluids through the IV, but it will be used later to give you anesthesia (medication to make you sleepy). Once you’re asleep, your doctor will start your procedure.
**During Your Procedure**

You’ll lie on your stomach on the table with a pillow under your hips. Your back will be cleaned, and you’ll get an injection to numb the area about half way up your back. Your doctor will use x-rays to guide the needle with the block. They will then inject the medication into the area of your celiac plexus. Your doctor will remove the needle and place a bandage (Band-Aid®) on the site.

Your procedure will take about 90 minutes.

**After Your Procedure**

**In the hospital**

When you wake up after your procedure, you will be in the Post Anesthesia Care Unit (PACU). A nurse will be monitoring your body temperature, pulse, blood pressure, and oxygen levels. You will stay in the PACU until you’re fully awake.

When you wake up you may:

- Feel dizzy for a moment.
- Have a full and warm feeling in your abdomen.
- Feel nauseous, feel like you’re going to throw up, or both.
- Feel drowsy or confused. You’ll stay in the recovery room until you feel better.

Your nurse will review your discharge instructions with you and your caregiver before you go home.

**At home**

- You can resume taking your pain medication right after your procedure.
- Your back may feel sore for a few days in the area where the needle was placed.
- You may have diarrhea (loose or watery bowel movements) for 3 to 5 days.
- Don’t drive or use heavy machinery for 24 hours after your procedure.
- Don’t drink alcohol for 24 hours after your procedure.
• You can take the Band-Aid® off the night of or the morning after your procedure.

• You can shower the day after your procedure.

One of your healthcare providers from the Pain Service will call you 2 to 3 business days to see how you’re feeling.

**Pain management**

• You may have more pain for 24 hours after the procedure. You may have to take extra doses of your medication for 1 to 2 days. If the pain continues for over 48 hours, call your doctor.

• It may be a few days or more before you feel the full effects of the block. Keep taking your pain medication as prescribed. Your doctor or nurse will tell you how to slowly lower your pain medication based on how well the block relieves your pain.

The celiac plexus block works differently for everyone. The block can last several weeks to several months. When it wears off, your doctor will discuss other options with you.

**Call Your Doctor or Nurse if:**

• You have a temperature of 100.4° F (38° C) or higher

• Your pain changes within 24 to 48 hours after your procedure

• You have redness or swelling at the injection site

• You have any problems

• You have questions or concerns
Contact Information

If you have any of these side effects after your treatment, call the Anesthesia Pain Service at 212-639-6851. You can reach us Monday through Friday from 9:00 am to 4:00 pm.

If it’s after 4:00 pm, during the weekend, or on a holiday, call 212-639-2000 and ask for the anesthesia pain person on call.

For more resources, visit [www.mskcc.org/pe](http://www.mskcc.org/pe) to search our virtual library.