When your child has an operation, the general anaesthetic will render your child unconscious. Pain relief can then be provided using pain relieving medicines that will affect the whole body or by injecting local anaesthetic to numb (block) the area of the operation.

This leaflet aims to provide information for parents of children who may benefit from a local anaesthetic block called the caudal block to provide pain relief during and after surgery. It explains

- What a caudal block is and how it is performed
- Benefits
- Risks and side effects
- Advice once your child has been discharged home

What is a caudal block?

A caudal block is an injection of local anaesthetic, into the caudal space, at the base of your child’s spine. It is a safe and good form of pain relief for children who are having operations below the level of their belly button. It provides pain relief during the operation and can last for up to six or more hours afterwards. Sometimes a thin plastic tube, called a caudal catheter, is inserted and left in the caudal space so that local anaesthetic can be given through it continuously to make the pain relief last longer.

Before your child goes to have their operation, the anaesthetist will visit you and discuss the caudal block with you.
What are the benefits of having a caudal block?
By numbing the nerves, your child will feel little or no pain, so avoiding the need for strong pain relief during and after the operation. These strong pain relief medicines have unfortunate side effects including itching, feeling sick and vomiting. They also can make your child sleepy.
Caudal blocks cause less sickness and usually the child has a faster recovery after the operation.

How is it performed?
Once your child is asleep, they will be turned on to their side, their back cleaned using antiseptic solutions and the anaesthetist will inject local anaesthetic into the caudal space. This will numb the nerves leading to the area where the operation is to be performed. The anaesthetists may inject other pain relieving medications to make the block last longer.

Are there any side effects?

Very common side effects (1 in 10 children) and common side effects (1 in 100 children)

Weak/heavy legs: This is the most common side effect and occurs as the caudal block affects the nerves supplying the legs. It is temporary and strength to the legs will return to normal as the block wears off.

Inadequate pain relief: In about 1 in 20 children the block does not work. If this is the case the anaesthetist will give your child other forms of pain relief during the operation.

Difficulty passing urine: Usually, this is not a problem and patients manage to pass urine when they have had enough fluid to drink. Rarely, a catheter needs to be inserted temporarily into your child’s bladder to empty it.
Uncommon side effects and complications
(1 in 1,000 children)

**Sedation:** This may occur if your child has been given other pain relief along with the local anaesthetic into the caudal space.

**Itching:** This may occur if your child has been given morphine like pain relieving medication in addition to local anaesthetic.

Rare side effects and complications
(1 in 10,000 children)

**Nerve damage:** This may be temporary or permanent. It occurs very rarely in less than 1:10,000 patients.

Very rare side effects and complications
(1 in 100,000 children)

These are recognised complications of caudal blocks. Your anaesthetist can explain more about these complications. It is important to point out that a national review showed no incidence of permanent harm or death from over 18,000 caudal blocks in children.

**Infection:** This is very rare as the block is inserted in a sterile manner.

**Haematoma:** There is often a bit of bruising around the site of injection. Very rarely a blood clot can form inside the caudal space causing other complications including nerve damage which would need further treatment.

Injection of anaesthetic into the bloodstream: This is a very rare complication as various checks are performed to ensure the injection is not in a blood vessel. However, if this still were to happen, the anaesthetist will manage it appropriately in theatre.

Injection into the spinal fluid: Checks are performed to prevent this from happening. If it were to happen, it would make the effect of the block to be high. In this case your child’s breathing may need to be supported until the local anaesthetic wears off.
Advice once at home

Pain relief: Your child should continue to take regular mild pain relief (Paracetamol/ Ibuprofen) as advised by your anaesthetist, even if your child is comfortable. This will help as the caudal block starts to wear off. The pain relieving medication can be gradually reduced in frequency over the next couple of days.

Safety: It may take up to 12 hours for the sensation to your child’s legs to fully return, so your child should be supervised whilst walking or crawling. The use of hot baths or hot water bottles should be avoided during this time because your child will not be able to sense temperature and is therefore at risk of burns.

References


No Smoking Policy

Please protect our patients, visitors and staff by adhering to our no smoking policy. Smoking is not permitted in any of our hospital buildings or grounds, except in the dedicated smoking shelters in the grounds of our Central Manchester site.

For advice and support on how to give up smoking, go to http://www.nhs.uk/smokefree.

Translation and Interpretation Service

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