



SUPERIOR HYPOGASTRIC BLOCK

Most of the pain in the pelvic area is mediated by the superior hypogastric plexus. The superior hypogastric block has just been recently introduced for the treatment of pelvic pain, either nonmalignant or malignant pain. The plexus lies anterior to the body of the L3 to L5 vertebra. It contains postganglionic sympathetic fibers and afferent pain fibers. Innervation of the vagina, rectum, bladder, perineum, vulva, prostate, testes, and uterus arise from this plexus. Therefore, pain felt to originate from any of these structures could theoretically be treated by blockade of this plexus. The block is performed under CT and/or fluoroscopic guidance, with the needles placed anterior to the L5-S1 junction. After an IV is placed, you will be placed in the prone position. Using a live x-ray, the position of the plexus in the lower back will be identified, and the skin over that area will be numbed by local anesthetics. Under fluoroscopic guidance, a needle will be directed to the desired position. Prior to injecting the local anesthetic solution, the correct position of the needle will be confirmed using contrast solution.

The physician will use an x-ray machine during this procedure. If you are pregnant, it is important to inform your physician.

The procedure lasts about 20-30 minutes. After completion of the procedure, Band-Aids will be placed at the injection sites. A nurse will monitor the blood pressure and pulse and will review the discharge instructions with you.