Hip Radiofrecuency Ablation in a 12 years old Cancer Pain Girl.

German Acuña Game, Paula Retamal Vera.
Traumatological Hospital of Concepcion, Chile. South America.

Hospital Traumatológico de Concepción
Servicio de Salud Concepción

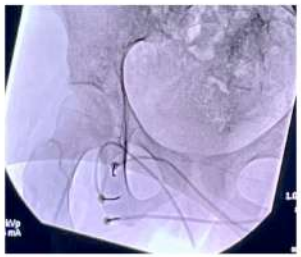
AUGUST 2024
WE682
IASP

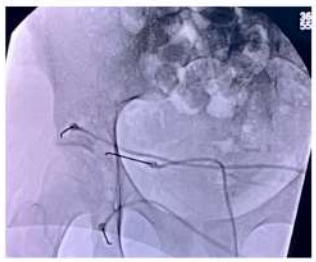
Background

The clinical case is a 12-year-old adolescent with no morbid history or allergies, who in 2023 was diagnosed with stage 4 perianal rhabdomyosarcoma cancer, who underwent chemotherapy, radiotherapy and surgery the same year, 6 months later she began to have pain. In the hip, the study showed a secondary injury, oral pharmacological treatment was started without response, then the patient was hospitalized for management with intravenous anti-inflammatory, an opioid patch was administered and finally a fentanyl pump was administered, the patient persisted with a pain crisis Eva greater than 5, so it was decided to perform Hip Neurolysis with radiofrequency.

Method

The patient underwent percutaneous radiofrequency in the pavilion under fluoroscopy. Thermal radiofrequency was applied to the capsular branches of the hip, causing a unipolar injury of 82 degrees for 90 seconds in each of the 3 10-millimeter curved-tip needles. Two of the three needles were placed in the femoral articular branches above the acetabulum, one needle was placed in the obturator branch below the acetabulum. Then 3 needles were placed in the ischiopubic ramus causing two bipolar lesions. At the end of the procedure, Depomedrol 40 mg and Levobupivacaine 25 mg were injected.



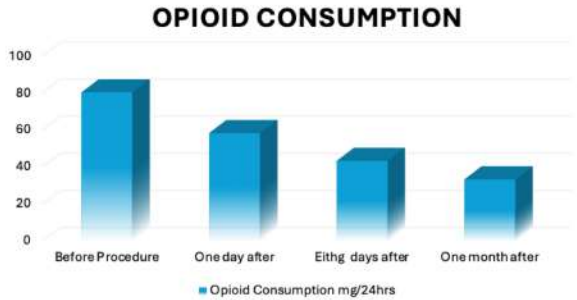


Results

The day before the percutaneous RF intervention, the patient was receiving an intravenous morphine pump 35 gamma kilo per hour, plus intravenous bolus morphine 3.5 mg every 4 hours, and was also using fentanyl in a transdermal patch 50 kilohours per hour, that is, the day before. At the procedure he had an opioid consumption equivalent to 80 mg of intravenous moerfine in 24 hours, thus maintaining pain crises of VAS 5 three times a day. One day after the procedure, the opioid pump had been reduced and the morphine per schedule was stopped SOS achieving baseline static VAS 0/10, dynamic VAS 2/10 and pain crisis VAS 3/10 that did not require rescue, intravenous medications were progressively reduced and the patient went home after 8 days with patch analgesia and rescue of pain. SOS oral morphine maintaining the values of the visual analogue scale just mentioned and she achieved greater functionality.

Conclusions

This case demonstrates the potential efficacy and safety of this procedure in a pediatric patient. While our case is the first documented report of an oncological pediatric hip denervation for palliative purposes, more research is needed within a pediatric hospital. population to better identify any long-term benefits.



Correspondig Auhtor:
1. German Acuña G
2. Paula Retamal Vera
germanacuna13@gmail.com
dra.paula.retamal@gmail.com
+56981897933 cell phone

BIBLIOGRAPHIC REFERENCES:

- BHATIA A, HOYDONCKX Y, PENG P, COHEN SP. RADIOFREQUENCY PROCEDURES TO RELIEVE CHRONIC HIP PAIN: AN EVIDENCE-BASED NARRATIVE REVIEW. REG ANESTH PAIN MED. 2018 JAN;43(1):72-83. DOI: 10.1097/AAP.0000000000000694. PMID: 29140960.
- KHAN JS, KRANE EJ, HIGGS M, PRITZLAFF S, HOFFINGER S, OTTESTAD E. A CASE REPORT OF COMBINED ULTRASOUND AND FLUOROSCOPIC-GUIDED PERCUTANEOUS RADIOFREQUENCY LESIONING OF THE OBTURATOR AND FEMORAL ARTICULAR BRANCHES IN THE TREATMENT OF PERSISTENT HIP PAIN IN A PEDIATRIC PATIENT. PAIN PRACT. 2019 JAN;19(1):52-56.
- TOMLINSON J, ONDRUSCHKA B, PRIETZEL T, ZWIRNER J, HAMMER N. A SYSTEMATIC REVIEW AND META-ANALYSIS OF THE HIP CAPSULE INNERVATION AND ITS CLINICAL IMPLICATIONS. SCI REP. 2021 MAR 5;11(1):5299. DOI: 10.1038/S41598-021-84345-Z. PMID: 33674621; PMCID: PMC7935927.