

RETAINED EPIDURAL CATHETER POST CAESAREAN DELIVERY, TO REMOVE OR NOT TO REMOVE: A CASE REPORT

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Introduction: The use of spinal or epidural catheter for pelvic and lower extremity surgery are common. Preoperatively, the risk of broken or retained catheter often explained to patient. Immediate surgical removal is debatable, however it is indicated if patient presenting with symptoms such as spinal stenosis.

Discussion: A 39-years-old lady , gravida 4 para 3 at 38 weeks was posted for emergency caesarean section for fetal bradycardia. Her medical history included obesity with BMI of 38.9 and she had history of 1 previous caesarean section. Intraoperatively, she had extended tear up to vagina, unrepairable with massive post partum hemorrhage. Thus was proceed with hysterectomy. Post operatively, patient well with good recovery. However upon attempting to remove the catheter, the anesthetist failed to pull out the catheter. After multiple attempts with different positions and maneuvers by senior anesthesiologist, still failed to remove. CT scan was done and shows entanglement of the epidural catheter within right L3/L4 foramina (figure a & b) Patient has been explained regarding the event and she kept asymptomatic. Following multidisciplinary meeting involving anesthesia, obstetrics and spine, has made conclusion for surgical removal and patient consented . During the surgery under general anesthesia, the spine surgeon followed the catheter trajectory, dissected the tissue & noticed the tip of the catheter was stuck at the ligamentum flavum. However during removal, the tip broken but managed to remove all. Patient asymptomatic post operatively and was happy with the surgery. After 2 months of follow up, the surgical wound well healed and patient remained asymptomatic.

Conclusion: Retained epidural catheter is a rare complication. If treated conservatively, reassurance asymptomatic patient is essentials knowing inert nature of the catheter. Surgical removal should be recommended and beneficial against complications such as radiculopathy or spinal stenosis.