Comparison of Two Different Techniques in Ultrasound Guided Infraclavicular Block: Jedi and Classic Grip

SÜLEYMAN CAMGÖZ[1], Serap DİKER[1], Betül GÜVEN AYTAÇ[1], and İsmail Aytaç[1]

[1]Ankara City Hospital

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Abstract

Background: The widespread use of ultrasonography in peripheral nerve blocks requires an assistant. Pappin et al. described the "Jedi grip" technique in which the practitioner works alone by controlling the ultrasound prob with one hand and the needle and injector with the other. In this study, we aimed to compare the block characteristics of the "Jedi grip" technique with the classical technique that performed with an assistant. Methods: 78 patients were included in our study. They were randomly divided into two groups (Group I: Jedi grip and Group II: Classical grip technique). Local anesthetic was applied to both groups from 10 ml of 0.5% bupivacaine +10 ml of 2% prilocaine mixture. The block characteristics were evaluated and recorded every 5 minutes for the first 30 minutes after each block. When the sensory block score was 7 and the total score was 14 or above, the block was considered successful, and the patient was ready for surgery. Results: There was no significant difference between the groups in terms of block characteristics such as block pain, number of attempts, arterial puncture, sensory and motor block onset and regression times, time to be ready for surgery, tourniquet pain, use of additional anesthesia method, use of postoperative analgesia. The duration of block application was 158±47 sec in the Jedi group and 121±83 sec in the control group. Conclusion: The Jedi grip technique has been found to be applicable with the same confidence compared to the classical method in terms of block success and complications.

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Enrollment

Assessed for eligiblity (n=78)

Excluded (n=0)

Randomized (n=78)

Allocation

The Jedi grip technique (n=39)

The classical technique (n=39)

Follow-up

Lost to followup (n=0)

Lost to followup (n=0)

Analysis

Analysed (n=39)

Analysed (n=39)