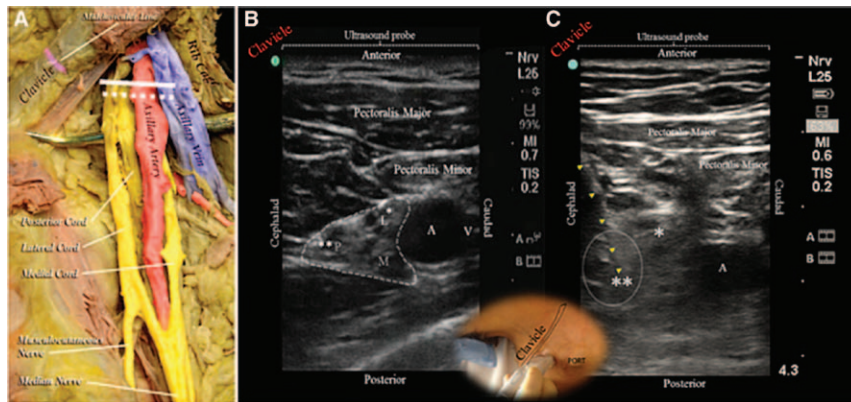


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Selective Infraclavicular Brachial Plexus Phenol Injection for the Relief of Cancer Pain

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for fig. C).² This report illustrates the feasibility of ultrasound localization and targeted phenol injection of the lateral or posterior cords just below the clavicle for palliative pain relief.

A 56-yr-old female with a nonresectable soft-tissue sarcoma in the right biceps muscle presented with burning pain in her upper arm despite methadone and fentanyl patient-controlled analgesia (500 μ g q 15 min, 600 μ g prn). In the medial infraclavicular region, the transducer was positioned in a sagittal plane perpendicular and caudal to the long axis of the clavicle (Oval inlet). Figure B depicts a typical sonograph of the brachial plexus in a transverse cross-section between the axillary artery and the clavicle beneath the pectorals muscles. To preserve wrist motor function, 5 ml of 6% aqueous phenol was injected in the lateral cord, but resulted in only a 50% reduction in pain (fig. C, asterisk).³

An additional injection of 5 ml 6% aqueous phenol targeting the posterior cord (fig. C, double asterisks) produced 100% pain relief with complete loss of upper extremity proprioception and motor function. She was discharged home pain free, and no immediate or short-term complications were reported.

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Competing Interests

The authors declare no competing interests.

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