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THE SPINAL CORD ACCESS SYSTEM: A NEW TOOL FOR REPEATEDLY ACCESSING THE EPIDURAL SPACE. G. Kizelshteyn*1, E. McNamara*2, K. Diagnault*2, K. Narra*3, J. Heavner3 (SPON: C. Iacono), Dept. Of Anesthesiology, NYMC, Valhalla, NY 105951 and TTUHSC, Lubbock, TX 794302, and Chelmsford, MA 018243, USA

Aim of Investigation: This study evaluated a non metallic Spinal Cord Access (SCA) designed to allow instruments to be introduced into and withdrawn from the epidural space for diagnostic and therapeutic purposes in pain patients.

Methods: The SCA consists of a radiopaque plastic introducer over an epidural needle. The epidural needle is removed after percutaneous placement of the introducer allowing the introducer tip to curl a predetermined amount (about 15-35°). The SCA was placed into the epidural space at L3-4 in five human cadavers. Manipulation of the SCA was evaluated visually via a fiberscope placed in the epidural space at L4-5.

Results: The SCA was easily introduced into the epidural space without peeling. When the SCA was rotated 360° in the epidural space, it did not kink or become blocked. Epidural catheters placed through the introducer were directed toward the desired level using the curved tip of the SCA as a guide, and withdrawn multiple times.

Conclusion: The SCA can have a significant role in facilitating doing procedures in the epidural space with percutaneously placed instruments. The SCA allows for increased patient safety in accessing the epidural space and permits the clinician a high degree of control over the path the instruments take.