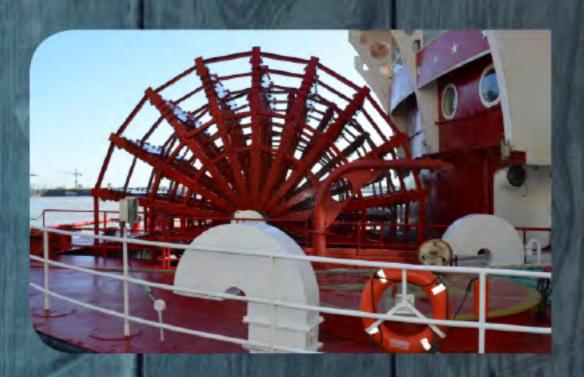
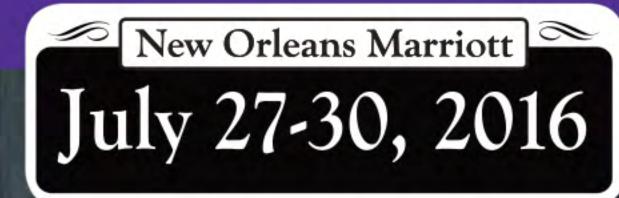


### 24TH ANNUAL SCIENTIFIC MEETING SLIDES





#### SPINE INTERVENTION SOCIETY 24<sup>TH</sup> ANNUAL SCIENTIFIC MEETING Navigating the Changing Landscape in Spine Care









## **Duration of Action/Which Local Anesthetics to Use**

#### Stephan Klessinger, Germany





# ulm university universität UUUIMM







No Disclosures





# • Potency Speed of Onset Duration of Action









## A Variety of Local Anesthetics

**SA** 



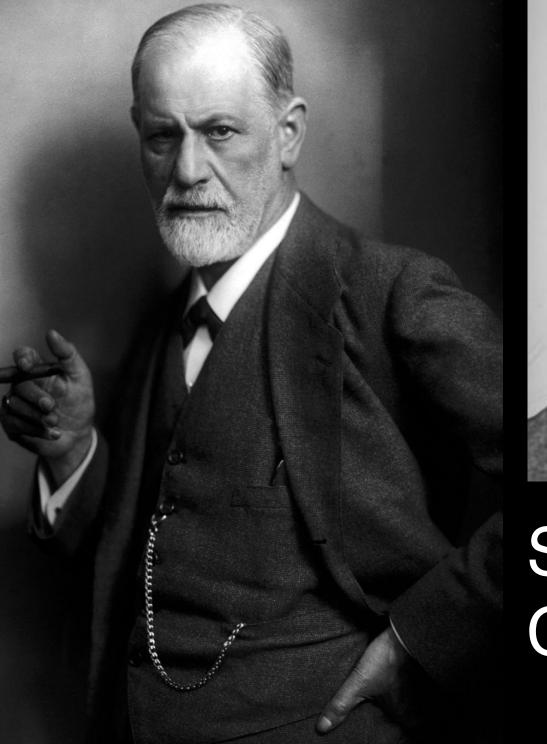


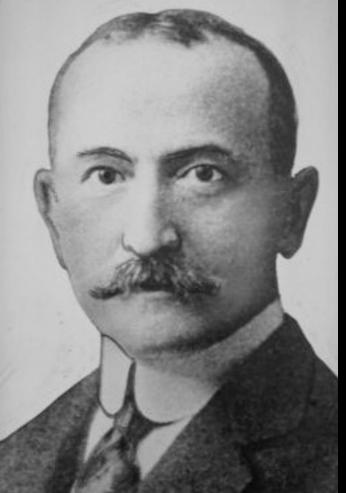




#### Cocaine – 1884

#### Problems: addiction not sterilizable





#### Sigmund Freud Carl Koller







## **Chemical Characteristics**

- Reversible effect
- Soluble in water
- Sterilizable
- Tissue compatibility
- Rapid onset



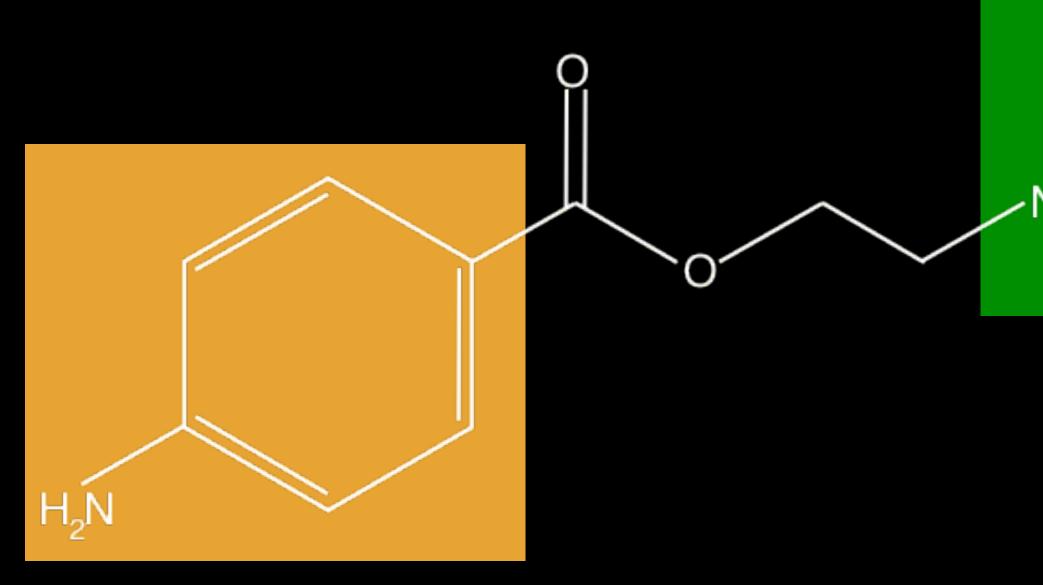
**Cocaine** – 1884  $\overline{\mathbf{v}}$ Procaine – 1905

#### Procaine: slow onset low potency

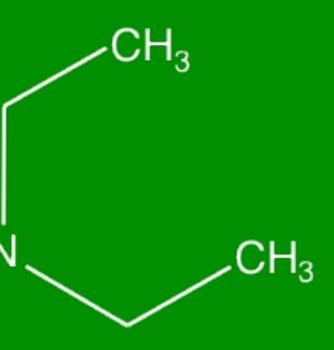




## Procaine – Structure

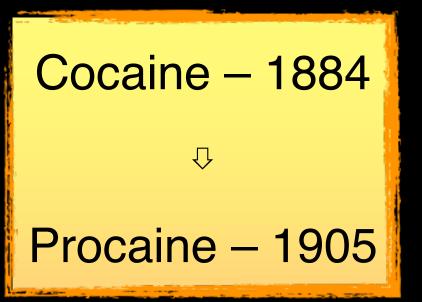








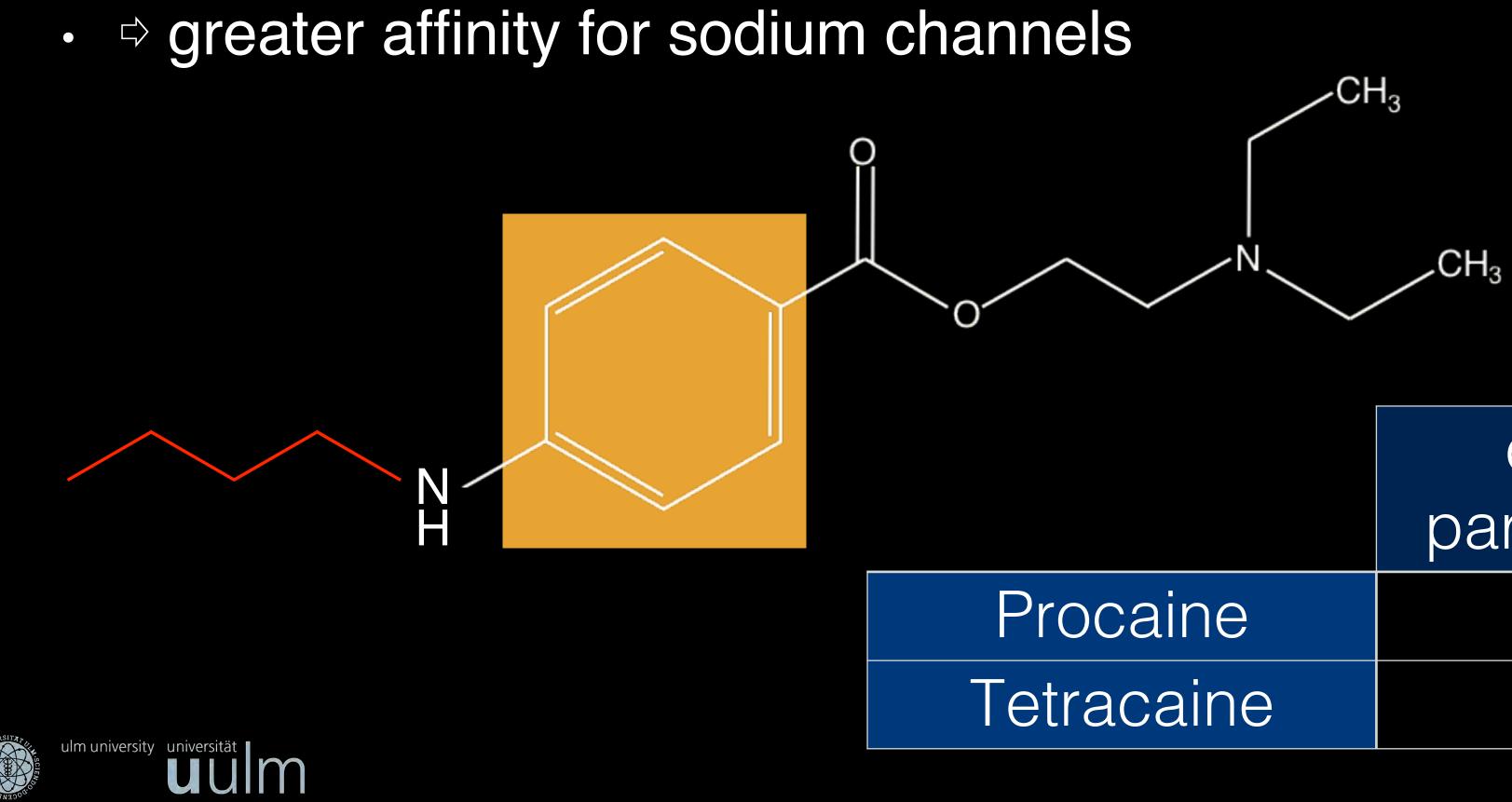
pH 5 – 6 [BH+]





### SPINE SIS

- Potency is related to lipid solubility
- The more lipophilic, the more readily it permeates neuronal membranes



## Potency



Cocaine – 1884  $\overline{\mathbf{v}}$ Procaine – 1905  $\overline{\mathbf{U}}$ Tetracaine – 1930

	octanol:water
	partition coefficient
Procaine	100
etracaine	5822







## Speed of onset



- across the nerve membrane
- half un-ionized
- pKa approximates physiologic tissue pH means faster onset
- pKa > 9: nearly no effect of LA
- Higher concentration speeds the rate of onset ullet

### Procaine Tetracaine





• It is the un-ionized form that more readily diffuses pKa = pH at which a given drug is half ionized and

Low tissue pH (inflammation): less effect of LA

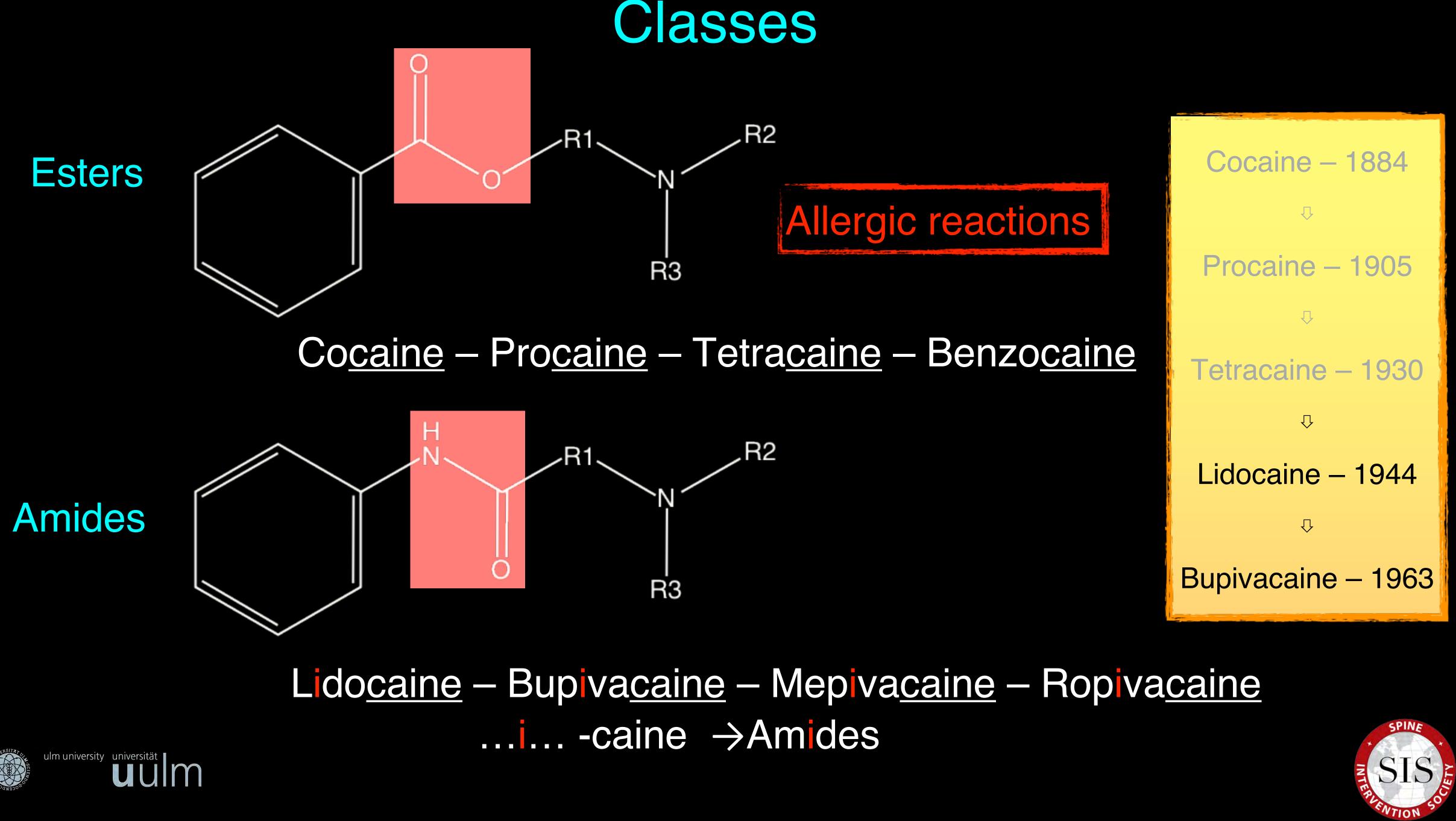
octanol:water partition coefficient	pKa
100	8.9
5822	8.4

Cocaine – 1884  $\overline{\mathbf{U}}$ Procaine – 1905 Tetracaine – 1930









	octanol:water partition coefficient	Relative t Potency	pKa	Onset	Type
Procaine	100		8.9	Slow	Ester
Tetracaine	5822	8	8.4	Slow	Ester
Lidocaine	366	2	7.7	fast	Amide
Bupivacaine	3420	8	8.1	Slow	Amide





### Esters – Amides





## **Duration of Action**

## Protein binding Metabolism Site of injection Channels







## **Duration of Action – Protein Binding**

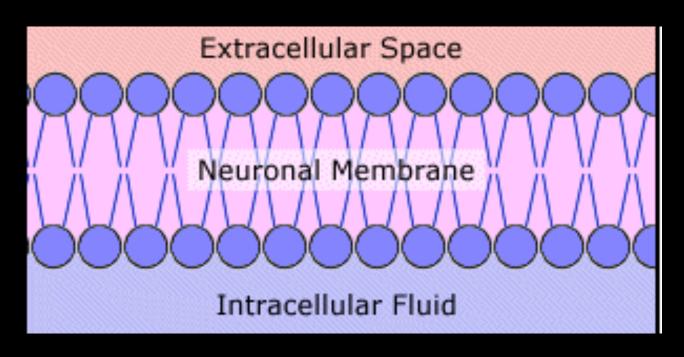
## Protein binding Metabolism Site of injection Channels

Greater protein binding ⇒ longer associated with neural membrane

Ionger duration of action

	octanol:water partition coefficien	Relative t Potency	pKa	Onset	Protein binding
Lidocaine	366	2	7.7	fast	64 %
Bupivacaine	3420	8	8.1	Slow	96 %









## **Duration of Action – Metabolism**

### Protein binding

#### Metabolism

### Site of injection

### Channels

#### **Esters:**

- plasma pseudocholinesterase ullet

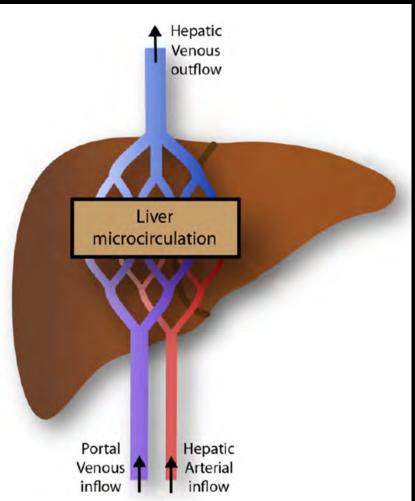
### Amides:

- ullet
- •
- clearance is highly dependent on hepatic blood flow.



⇒ para-aminobenzoic acid (PABA) ⇒ allergic reaction more rapidly catabolized, shorter duration of action

metabolism via hepatic P450 enzyme system nearly all metabolism via the liver Venous outflow





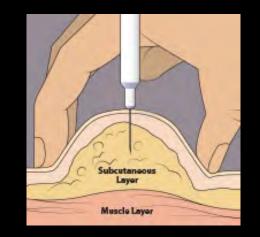


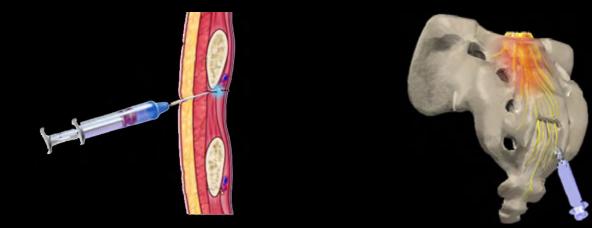
## Duration of Action – Site of injection

## Protein binding Metabolism Site of Injection Channels

- from from the site of injection
- agent is absorbed.

subcutaneous > intercostal > caudal > epidural > peripheral nerve > intrathecal

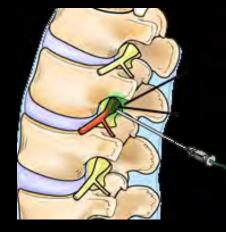




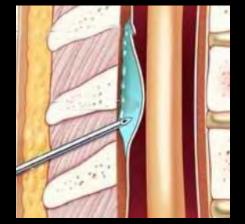




 The duration of LA action depends on the absorption ⇒ dependent on the blood supply • The more vascular the location, the more rapidly the







the use of epinephrine is not recommended for spine procedures



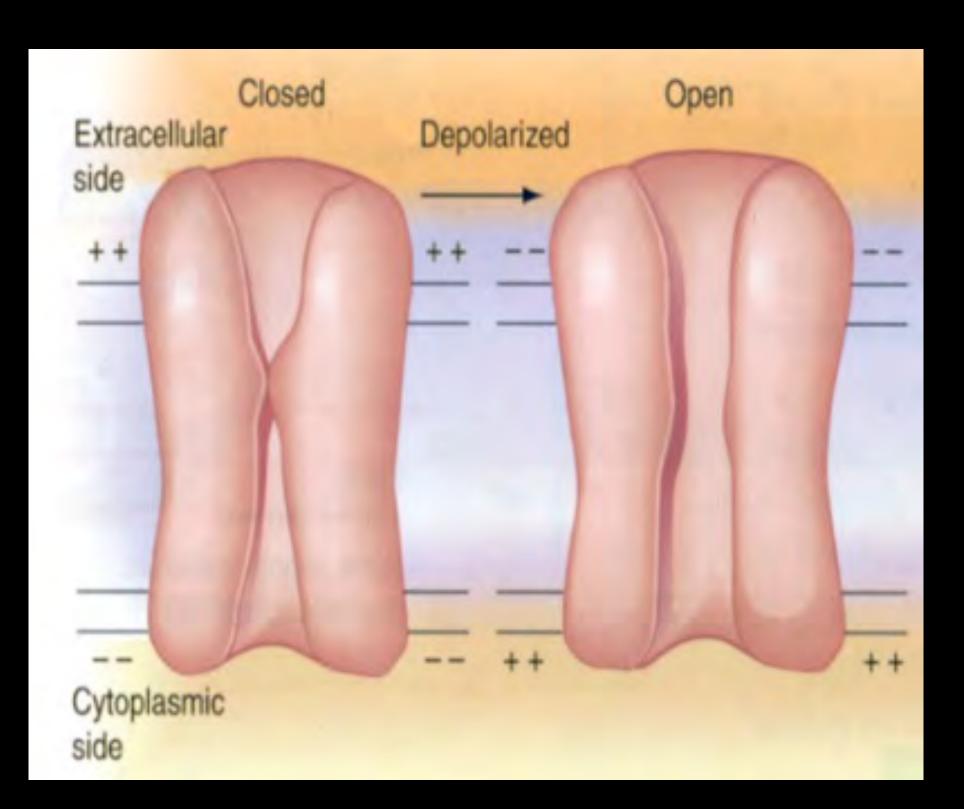


## Duration of Action – Channels

## Protein binding Metabolism Site of injection

#### Channels

- ullet
- ulletopen channels ⇒ longer duration of action

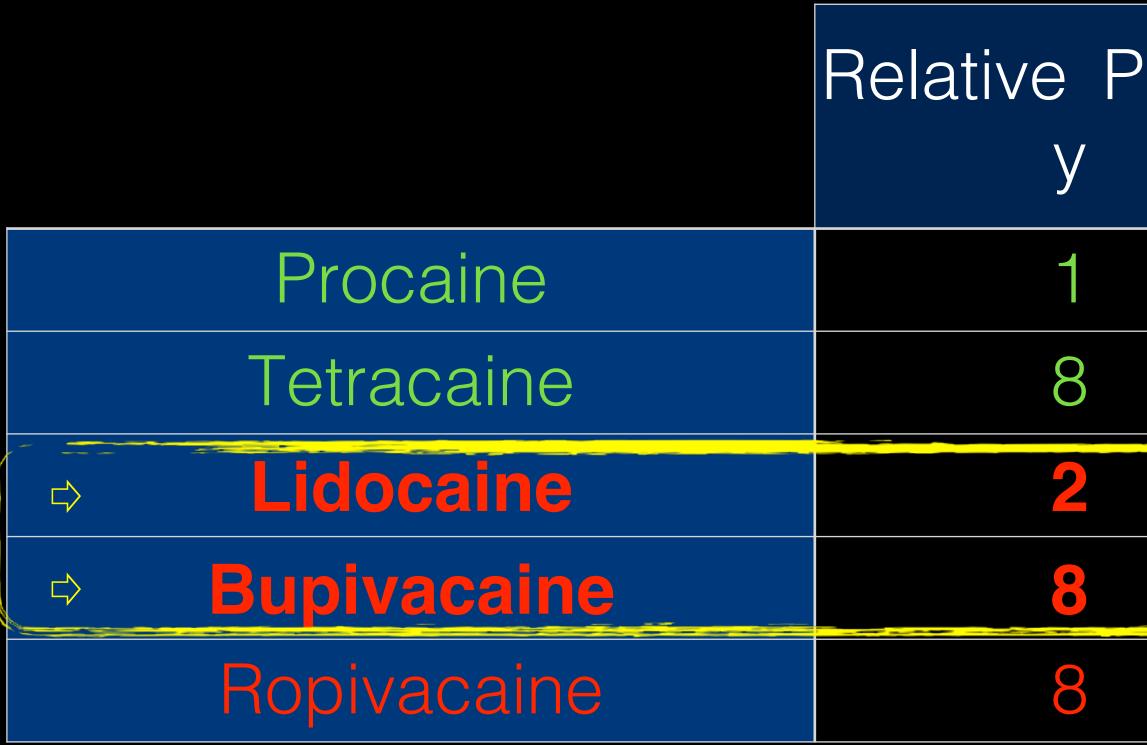




used pre-emptively, local anaesthetics act on closed channels. They prevent depolarization used to block ongoing pain, local anesthetics may act on



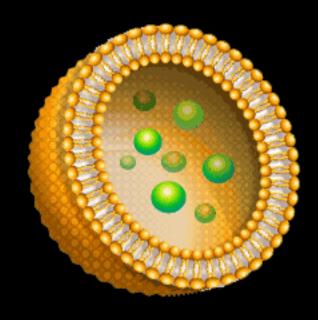






## Overview

Potenc	Onset	Duration of Action
	SIOW	20 – 30'
	Slow	1.5 – 2 h
	fast	<mark>30 - 60'</mark>
	Slow	2-4h
	SIOW	2-4h









## We Need Two Local Anesthetics

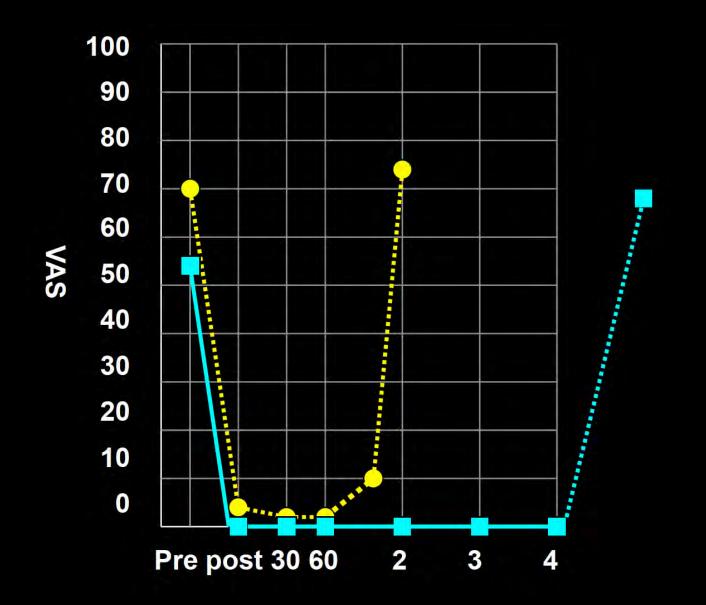
Comparative medial branch blocks with: short acting lidocaine long acting bupivacaine

### **Duration of Action**

- No absolute duration of action for a given local anesthetic
- Typical mean duration. Duration different for every patient
- However, in a given patient: short-acting shorter than long-acting Duration measurable in hours, not days







Response: ⇒ concordant ⇒ discordant ⇒ discrepant





## Thank you!

- Forth W, Henschler D, Rummel W, Starke K. Allgemeine und spezielle Pharmakologie und Toxikologie. BI Wissenschaftsverlag. 6. Auflage 1992
- Fenton DS, Czervionke LF. Image-Guided Spine Intervention. Saunders, Philadelphia 2002
- Baker R, Garg V, Bogduk N. Local Anesthetic Primer for the Interventional Pain Specialist. SIS
- Bogduk N. Best Practice & Research Clinical Anaesthesiology 2002; 16:565-578.
- Rubin AP, Lawson DIF. Anaesthesia 1968; 23:327-331.
- Watt MJ, Ross DM, Atkinson RS. Anaesthesia 1968; 23:331-337.
- Moore DC, Bridenbaugh LD, et al. Anesthesiology 1970; 32:460-463.
- Moore DC, Bridenbaugh LD, et al. JAMA 1970; 214:713-718.
- Mashimo T, Uchida I et al. Anes Analg 1992; 74:827-834.
- Kim J, Burke SM, et al. World Neurosurg 2016;16:30185-1.
- Engel AJ, Bogduk N. Pain Med 2016 Mar 19 [epub ahead of print]







