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In response to – ‘‘Three Blocks including Pericapsular Nerve Block (PENG) for a femoral shaft fracture pain’’ by Onur Koyuncu et al.



Em resposta a – ‘‘Três bloqueios, incluindo o bloqueio pericapsular (Pericapsular Nerve Block – PENG), para dor em fratura da diáfise femoral’’ por Onur Koyuncu et al.

Dear Editor,

I read with interest a recently published article in your esteemed journal title ‘‘Three blocks including Pericapsular Nerve Block (PENG) for a femoral shaft fracture pain’’ by Onur Koyuncu et al.¹ I personally congratulate the author for his innovative and intensive approach to provide analgesia in a case of fracture shaft femur extending up to head of femur. However, I have little reservation for his approach. Firstly, large volume of local anaesthetic was used to give three blocks which could lead to local anaesthetic toxicity even then, the pain control was up to 50% only. This effect could easily be attained by increasing the volume of local anaesthetic during PENG block. Various studies have shown that large volume can block femoral, lateral femoral cutaneous nerve and obturator nerve along with assessor obturator and articular branches of femoral nerves.^{2–4} Secondly, waiting for three minutes to assess clinical effect before going for second block was quite inadequate. As suggested by authors of PENG block,⁵ adequate time should have been given to assess the complete clinical effect.

Conflicts of interest

The author declares no conflicts of interest.

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