

**Ultrasound Guided Greater Occipital Nerve And Superficial  
Cervical Plexus Block In Pediatric Patients Undergoing  
Ventriculoperitoneal Shunts**

**Thesis**

**Submitted for Partial Fulfillment of  
M.D. Degree in Anesthesiology**

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**2017**

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**Abstract:**

The aim of this study was to assess the benefits of using ultrasound guided Greater Occipital Nerve And Superficial Cervical Plexus Block with subcutaneous infiltration of the abdominal site of incision combined with general anesthesia in pediatric patients undergoing VP shunts regarding hemodynamic responses, postoperative pain score, stress response, and incidence of complications.

This study was conducted as a randomized, prospective, controlled study on 40 patients scheduled for ventriculoperitoneal shunts insertion after approval of faculty of medicine Fayoum university ethical committee and written informed consent from the guardians of all patients enrolled in the study.

This study concluded that the use of combined ultrasound guided nerve block of the greater occipital nerve and the superficial cervical plexus blocks with subcutaneous infiltration of the abdominal site of incision produced hemodynamic stability for children undergoing ventriculoperitoneal shunt insertion especially during tunneling phase and less postoperative pain scores and prolonged the time of first request for analgesia without significant complications.