

PARAPLEGIA AFTER GENERAL ANESTHESIA: A DEBILITATING ADVERSITY

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Introduction: Post general anesthesia paraplegia is very rare and devastating complication. We report a case of a gentleman with acute paraplegia following emergency ligation of ruptured brachiocephalic fistula (BCF) under general anesthesia.

Discussion: A 57-year-old-man presented to casualty with spontaneous bleeding over right BCF during sleep. His comorbidity includes end stage renal failure, hyperparathyroidism, hepatitis B and C. Induction was uneventful and intubation was straight forward with minimal cervical manipulation. Blood pressure was generally normal except for transient hypotension intraoperatively. Blood loss was minimal and patient did not require transfusion. Post operatively, patient complained of loss of power and sensation over both lower limbs. MRI cervical done revealed severe multilevel disc degeneration from C3 to C7 causing spinal canal stenosis, cervical compressive myelopathy, and nerve root impingement. Intravenous dexamethasone therapy for 5 days was started with no improvement. His condition deteriorated steadily due to pneumonia and finally succumbed to death 10 days after the operation.

Conclusion: Acute paraplegia following general anesthesia is a perplexing condition with guarded prognosis. Strict precautions during anesthetic and surgical interventions must be taken to avoid such calamitous complication.