## **Complications involving nerve blocks:**

- Include a broken needle shaft
- Infection: Cellulitis (bacterial infection of the skin) can occur. The area where the drug was administered may become inflamed (swollen and red).
- infection of a synovial structure adjacent to the nerve anaesthetised.
- Local anaesthetic solution is detectable systemically, which could create a problem for a horse participating in a competition if the horse's serum is examined for the presence of drugs.
- There can be adverse reactions to the local anaesthetic if it is administered systemically (in the vein) which can result in cardiac arrest
- A hematoma at the injection site may occur
- When giving regional anaesthesia (especially in the distal aspect), local anaesthetic solution can be administered into a blood vessel, joint, tendon sheath, or bursa.
- After local anaesthetic solution is injected into the fascia surrounding a nerve in the distal section of the leg, pain relief and the resolution of lameness typically take place within 5 minutes, although anaesthesia of larger nerves in the proximal portion of the limb may require 20–40 min. If a horse's gait is observed before experiencing pain alleviation, the results of a regional nerve block may not be accurate. The clinician should be aware that the anaesthetic solution may move up the nerve to anaesthetise more proximal components. This can result in confusing test results. To avoid this complication, the gait should be evaluated within 15 min after administering a regional nerve block in the distal portion of the limb.