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# Role of sciatic nerve block in lower limb surgery

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Regional anaesthesia of extremities isn't a new idea, in last centuries , extremities were amputated after exposure of nerves and application of cocaine. Now regional anesthesia has gained a lot of popularity due to presence of new local anesthetics, improvement in block equipments and techniques. Sciatic nerve is one of the most common nerves that are blocked. It's formed of branches of L4, L5, S1,2,3. It arises from sacral plexus and passes thorough the lower part of sciatic foramen in the gluteal region, it ends half way down the back of the thigh by dividing into common peroneal and tibial nerves. This division may occur at various levels. Sciatic nerve block has many indications that could be concluded in lower limb surgeries below knee either as a sole technique or combined with femoral nerve block. The sciatic nerve block has many approaches; the posterior approach of Labat, the anterior approach and the lower approach, each of them acquire specific position. Localization of the nerve has several described methods, including fascial "pops," elicitation of one or more paresthesias, electrical stimulation, and field infiltration. More recently, direct imaging by ultrasonography, fluoroscopy, computed tomography (CT), and magnetic resonance imaging (MRI) has been used. Although no definitive