

ANAESTHESIA LOCAL REGIONAL

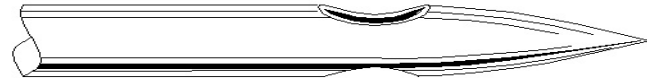
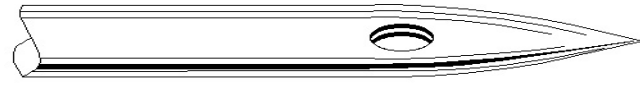


- **Spinal Needles**
- **Epidural Needles**
- **Sets for Continuous Epidural Anesthesia**
- **Needles for Combined Spinal-Epidural Anesthesia**
- **Sets for Combined Spinal-Epidural Anesthesia**

Single Puncture Spinal Needle

Much research into spinal anesthesia has been directed towards the prevention and reduction of complications associated with the technique.

The ELDOR product is the culmination of the technical development of spinal needles by ELDOR.



WHY ELDOR

- Because its the only spinal needle with double lateral holes.
- Because its modified pencil point tip minimises complications in spinal anesthesia, reduces the incidence of Post Dural Puncture Headache (PDPH)

Improved patient care in spinal anaesthesia



ELDOR 26090

26G X 90mm

CE 0120

Eldor Twin Hole Design Advantage

- Twice the speed in CSF reflux. (Fig.1).
- A faster distribution of the anesthetic agent in the sub arachnoid space, makes it possible to reduce the quantity of anesthetic administered. (Fig.2).

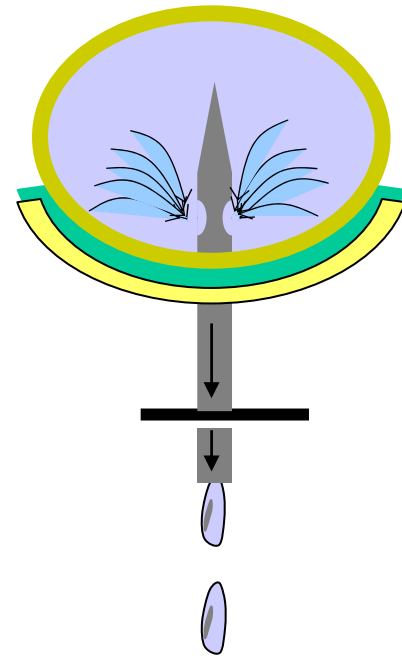


Fig.1. CSF reflux

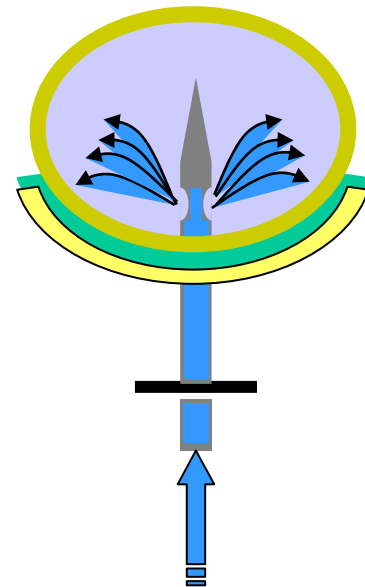


Fig.2. Diffusion of anesthetic solution

ELDOR 26G Quality Design provides a needle that is efficient, minimises the PDPH index with twin small symmetrical holes that provide a significantly stronger tip and reduces the risk of lumbar puncture failure.

Product Details:

Atraumatic spinal needle with a modified Whitacre closed cone pencil point.
Sterile, single-use, non-pyrogenic.

Blunt double lateral apertures.

Manufactured from stainless steel (MSI304-SUS304 - Nippon Metal Industry Co. Ltd) 90mm long.

Hand polished surface.

Fracture resistant to 90° angle.

Polycarbonate hub (351-10 AJC60) epoxy joint.

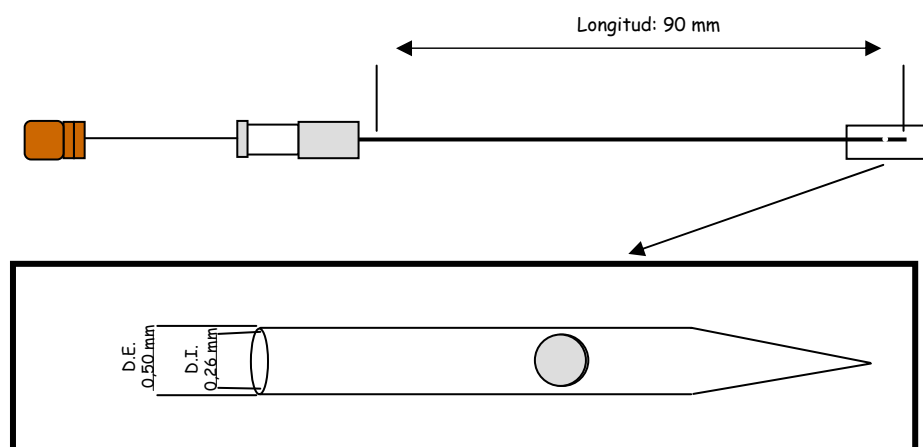
Needle calibre colour identification.

Needle introducers 20-22 (1 1/4").

Clear sided packaging.

Labelled needle size information.

Patent No. 5848996.



Warning:

- ✦ This product must be used by specialists (anesthetists) who have sufficient knowledge and experience for its adequate use.
- ✦ Single-use only. Do not resterilise.
- ✦ In cases of inadvertent osseous (bone) contact during spinal puncture, avoid pressure on the needle that might damage the tip. Only in extreme cases could the needle tip bend. The product quality and design allows extraction without tip damage.

SPINAL ANAESTHESIA



20 G = 0,90 mm



21 G = 0,80 mm



22 G = 0,70 mm



24 G = 0,56 mm



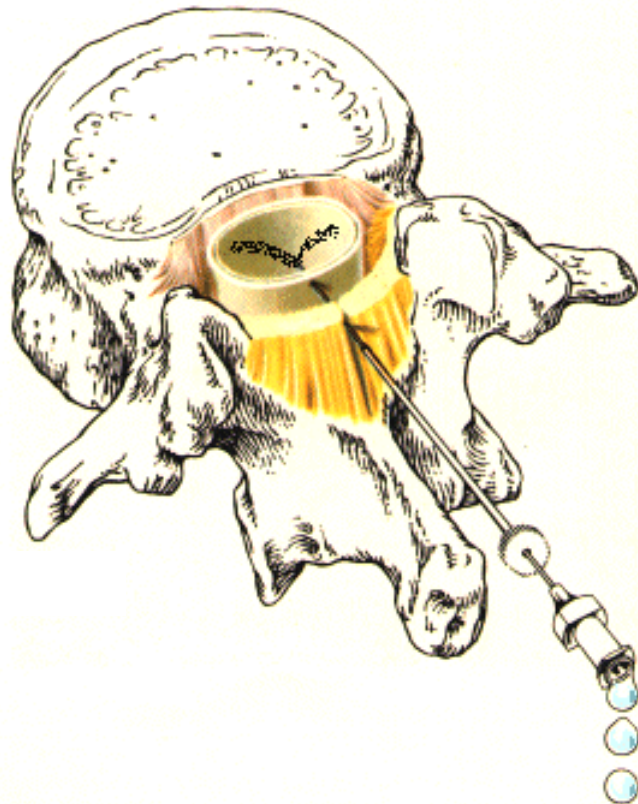
25 G = 0,50 mm



26 G = 0,46 mm

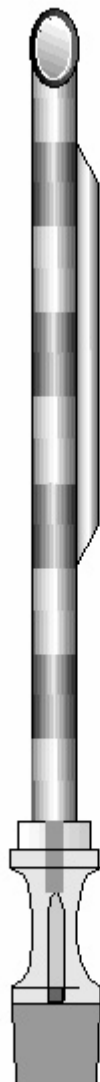


27 G = 0,33 mm



COMBINED SPINAL-EPIDURAL ANAESTHESIA

The combined Spinal-Epidural block (CSE) is an anesthetic technique that consists of a simultaneous sub-arachnoid and epidural block with a single puncture and line of feed.

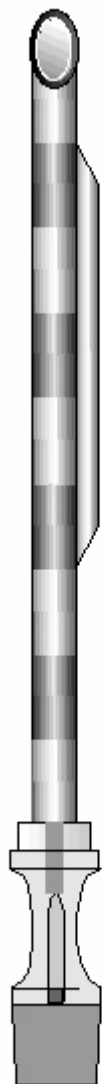


The **primary objectives** of the Spinal-Epidural block are:

- reduce the latent anesthetic time.
- reduce the volume and concentration of the local anesthetic.
- maintain the desired anesthetic level in the required time.
- provide the maximum post-op analgesic level.

The Eldor Needle: The needle-through-needle is a unique design that eliminates the danger of epidural catheter protrusion through the dural hole made by the spinal needle (different pathways for the epidural catheter and the spinal needle).



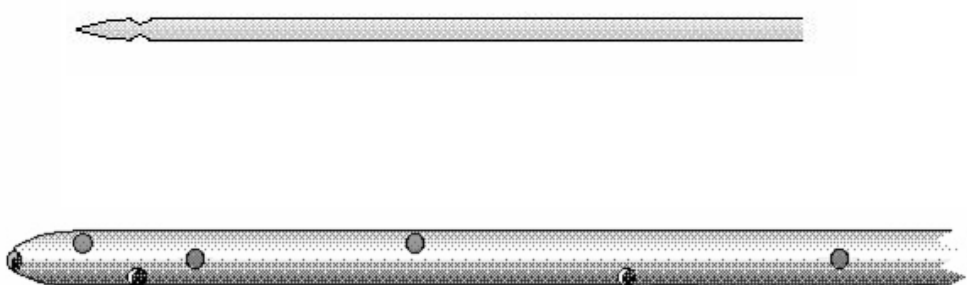


Eldor Needle:

18G Tuohy cannula with parallel guide and bevel for the introduction of the spinal needle.

Spinal needle Eldor 26G, with double lateral holes (figure).

Eldor epidural catheter (figure).



Technique

1. Prepare the puncture site using antiseptic technique and local anesthesia.
2. Using the Eldor needle, locate the epidural space.
3. Introduce the epidural catheter and inject a test anesthetic solution.
4. Using the parallel guide (fixed to the exterior wall of the epidural needle), the 26G spinal needle is inserted.
5. Following the CSF exit, a local anesthetic is injected into the sub-arachnoid space.
6. Following the spinal puncture, the Eldor needle is removed together with the spinal needle, maintaining the epidural catheter in a firm position.
7. The filter is connected to the epidural catheter (Tuohy Borst adaptor) and aspirated to confirm that the catheter is in the epidural space
8. Firmly attach the epidural catheter.

COMBINED SPINAL-EPIDURAL ANAESTHESIA

Eldor Needle, Tuohy 18G cannula, parallel guide with bevel. Patent No. 5163901.

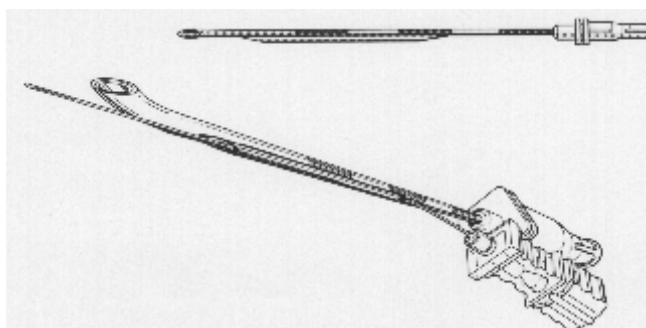
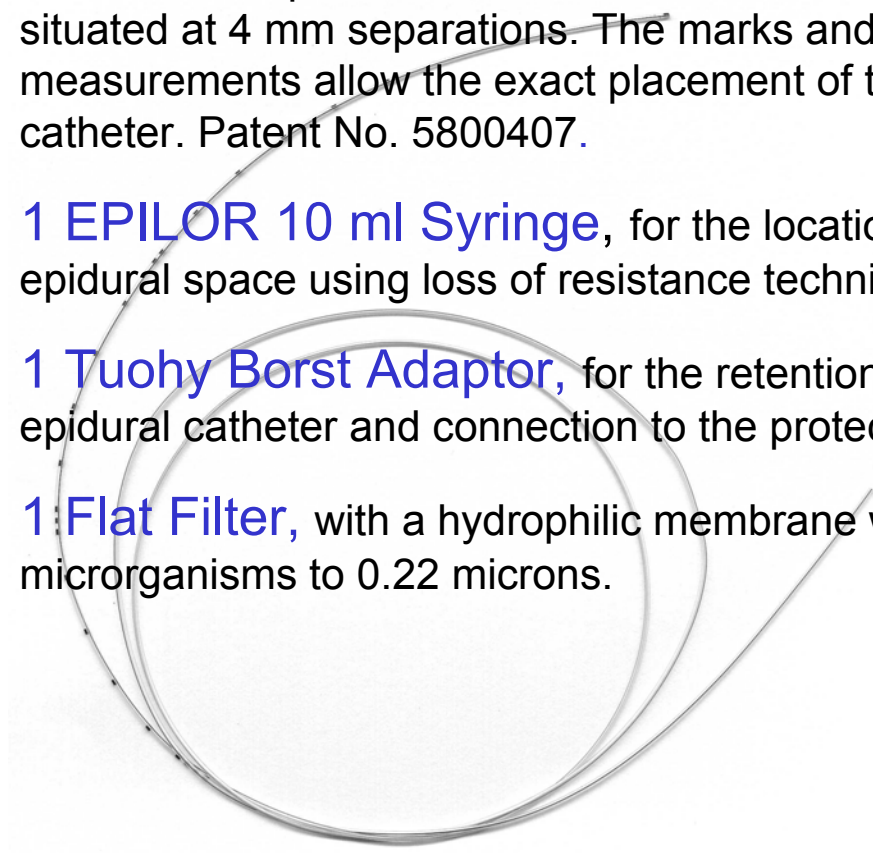
Eldor Spinal Needle 26G, Atraumatic needle with modified Whitacre pencil point, closed cone, double lateral holes. Patent No. 5848996.

Eldor Epidural Catheter, polyamide, complete with a hole at the tip and 6 lateral holes. Lateral holes are situated at 4 mm separations. The marks and measurements allow the exact placement of the catheter. Patent No. 5800407.

1 EPILOR 10 ml Syringe, for the location of the epidural space using loss of resistance technique.

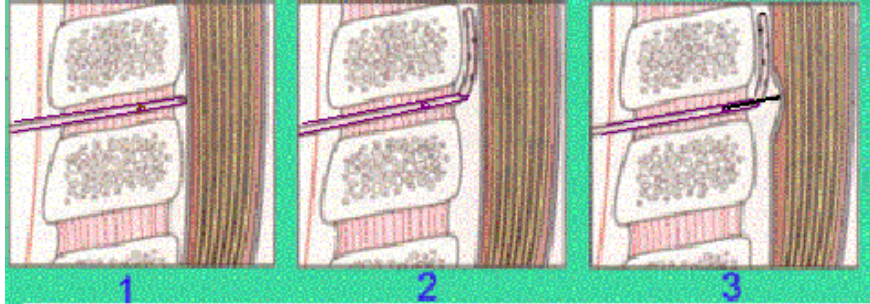
1 Tuohy Borst Adaptor, for the retention of the epidural catheter and connection to the protective filter.

1 Flat Filter, with a hydrophilic membrane which filters microorganisms to 0.22 microns.



Features

- The epidural catheter can be inserted before the spinal puncture.

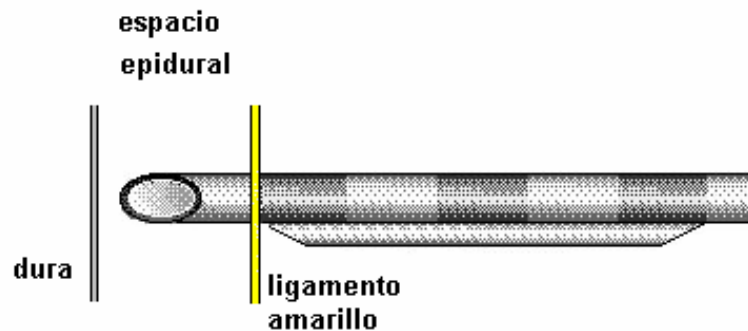


- Permits test dose prior to dural puncture.

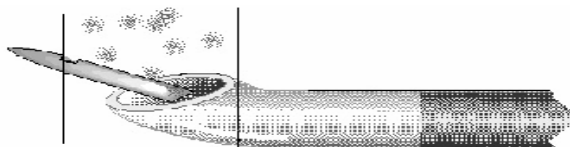
Interspinous Ligament



- The frequency and distribution of the holes in the catheter permits improved diffusion of the anesthetic solution in the epidural space. This avoids the partial blocking phenomenon and the obstruction of the catheter.



- The spinal probe serves as a reference to avoid involuntary perforation of the dura.



- Absence of any metallic particle production.