

Espocan[®]

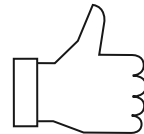
Combined Spinal Epidural
Anesthesia Set



The power of Combined Spinal Epidural Anesthesia

Imagine being able to combine the best features of spinal anesthesia¹

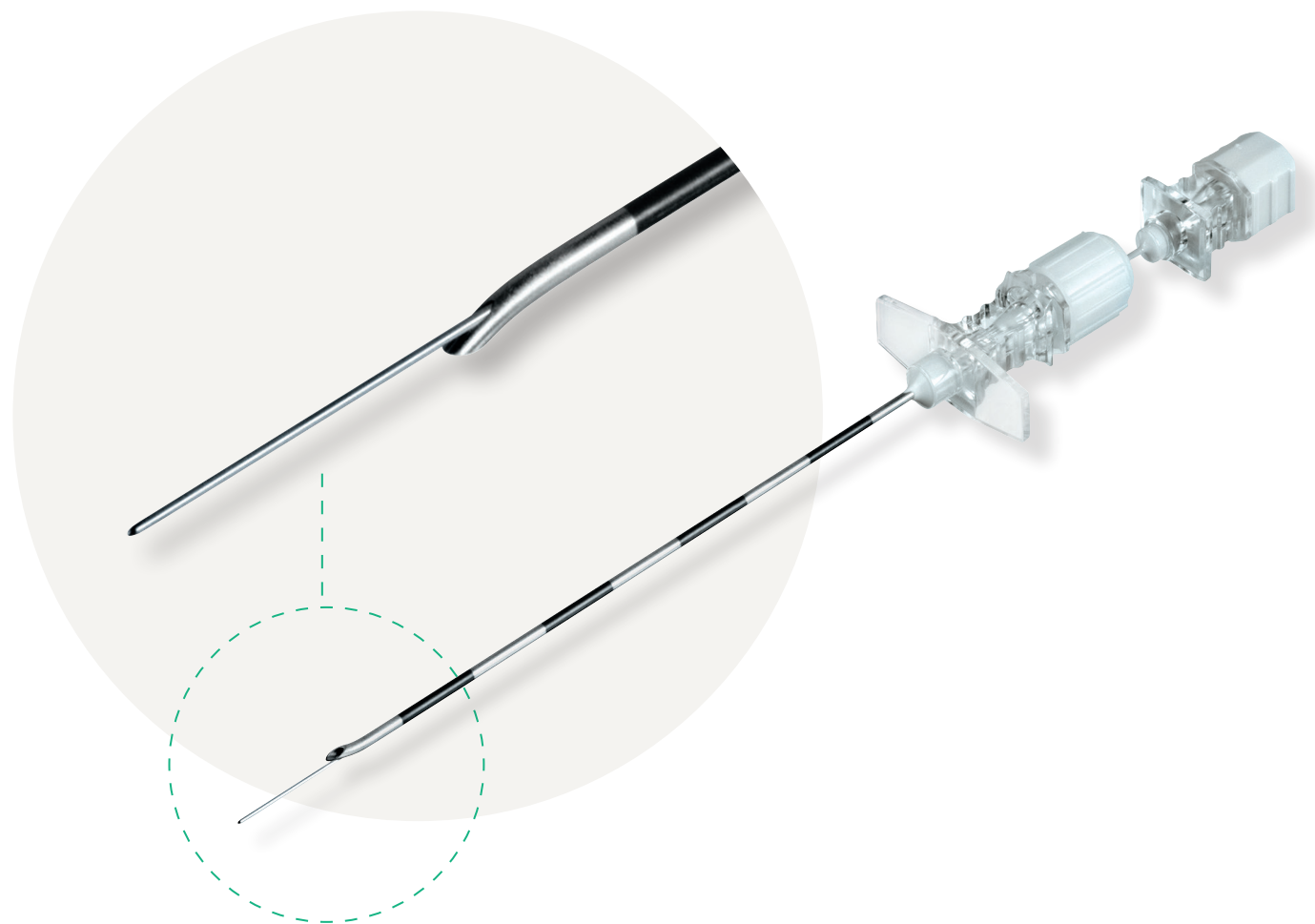
- Rapid drug onset
- Low drug dose
- Profound blockade



With the best of epidural blocks¹

- Titratable levels
- Ability to prolong block effects indefinitely

And having the technique be as safe as spinal or epidural alone² with even lower risk of overall epidural catheter failures than the epidural technique³.



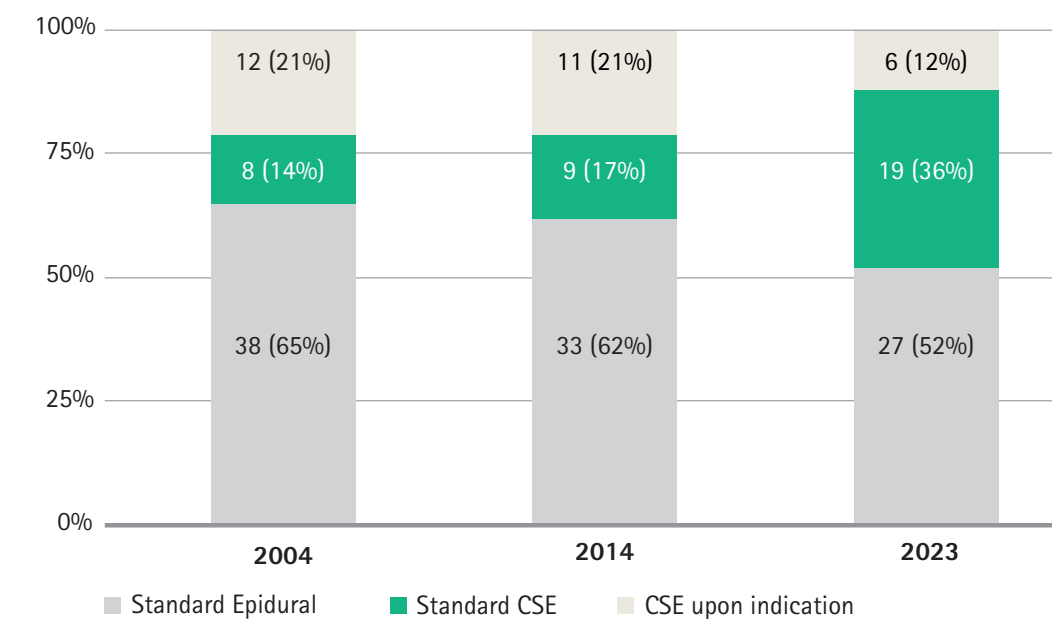
The Combined Spinal – Epidural (CSE) technique allows for benefits, minimizing disadvantages and maintaining safety. That's why it has become a versatile choice not only in obstetrics but also in orthopedic, vascular, gynecological, urological, and general surgeries² as well as in high-risk geriatric patients⁴.

A new favorite option

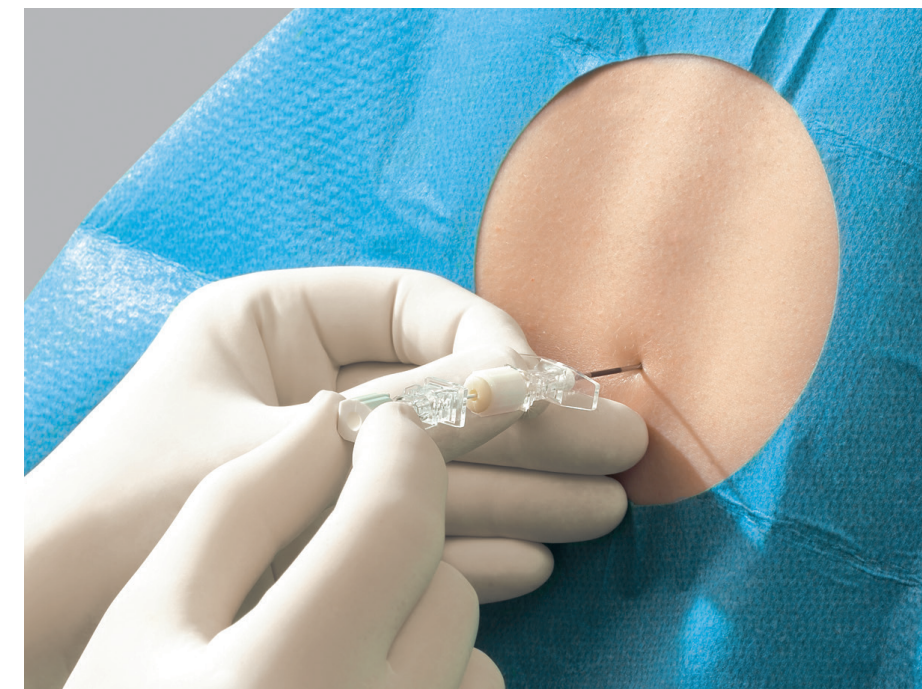
A study conducted in Belgium⁵ shows that CSE procedures are also becoming more and more common in labour and delivery.

Neuraxial technique for labour

Update on the obstetric anesthesia practice in Flanders/Belgium

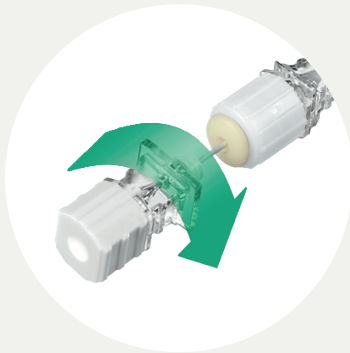


B. Braun has over **30 years** of experience manufacturing Espocan[®] CSE sets, allowing our customers to benefit from the precision, quality and control of our spinal needles and from the reliability and safety of our perican and perifix epidural devices all in one set.



Espocan® experience the best of both worlds at your hands.

Optional docking system for increased safety, ensuring the fixation of the spinal needle and allowing rotation of the spinal even in fixed position.



27G Sleeved spinal needle for smooth exit through the Tuohy needle back-eye⁷ allowing suitable tactile feedback.



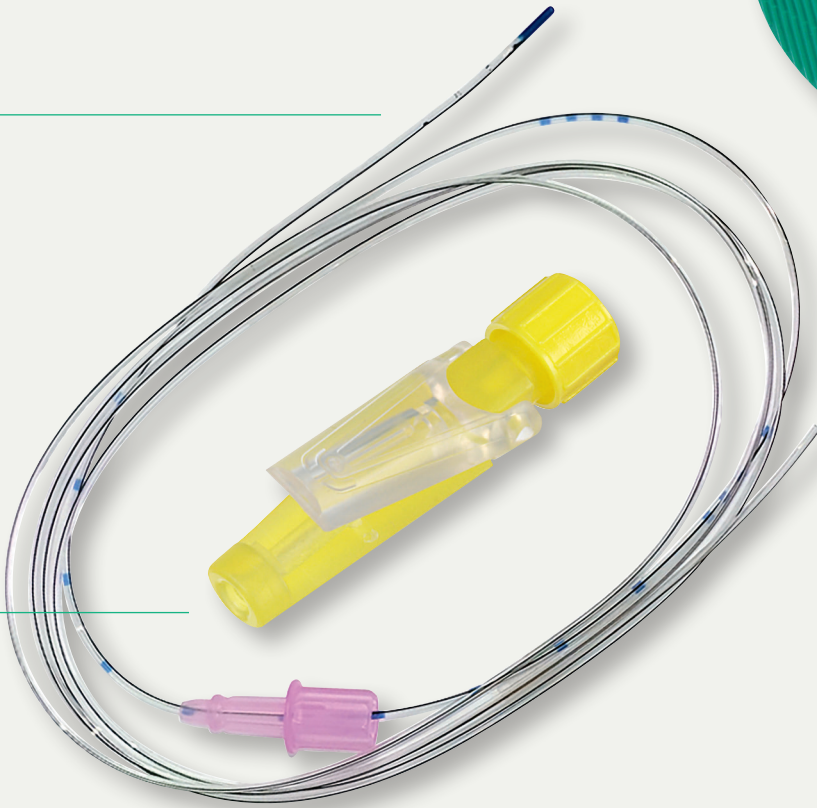
2 different options for epidural catheter:

Perifix® catheter & Perifix® SoftTip catheter flexible and kink-resistant, designed for enhanced anesthetic spread.

Manufactured without natural rubber / latex, DEHP or PVC, flexible and kink-resistant, visible under X-rays & MRI conditional.

Length markings are consistent part of our design. Catheter threader included.

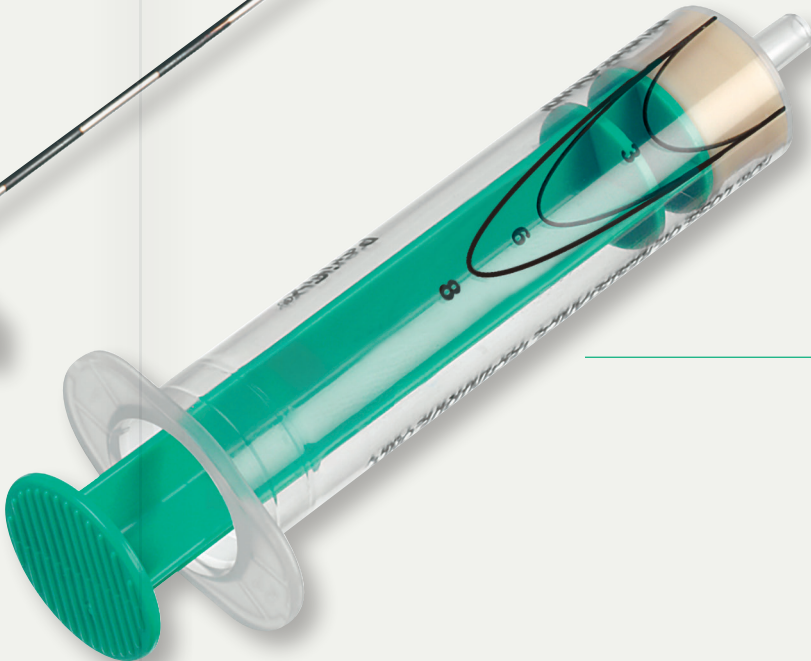
Perifix® catheter connector provides tactile and audible feedback upon closure plus a viewing window to ensure successful connection and safe catheter fixation.



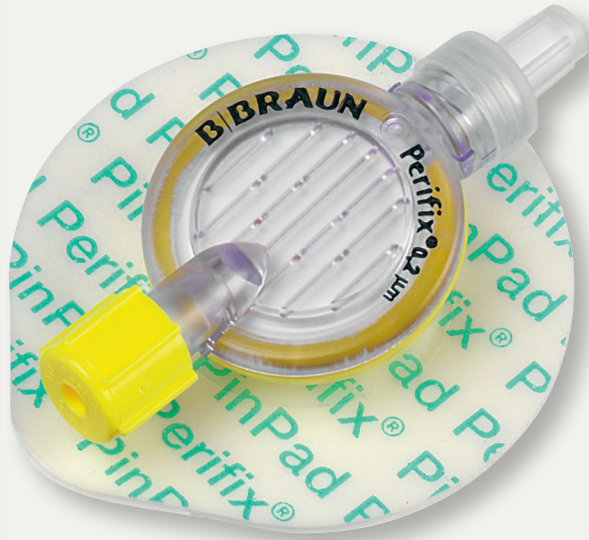
Perican® Touhy epidural with back-eye allowing safe insertion of the spinal needle⁶.



Perifix LOR syringe: Parabolic graduation of syringes reduce the risk of confusion with conventionally-marked syringes, suitable for air and saline application.




Perifix® Filter reduces the risk of bacterial infections, non pyrogenic.

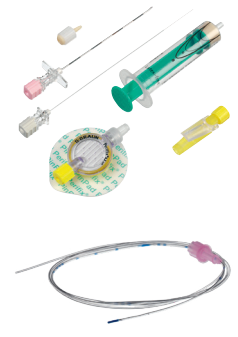


Perifix® PinPad allows rotation of the Perifix® Filter preventing strain on the catheter and reducing manipulation of the catheter connector reducing potential disconnections.

Portfolio overview

Sets for combined spinal and epidural anesthesia

Espocan® and Perifix® standard	Size (G) / Length (inch)	ø / Length (mm)	Units per box	Code no. (REF) Luer	Code no. (REF) NRFit®
	With quincke-bevel: Spinocan®				
	27 x 5"	0.42 x 125.5*	10	4556674	4556674N-01
	Pencil-point cannula: Pencan®				
	27 x 5"	0.42 x 127.5*	10	4556666	4556666N-01
All sets contain					
▪ Perifix® standard catheter, 3 lateral eyes					
▪ Perican® epidural needle, cannula ø 1.30 mm, 18 G x 88 mm					
▪ Perifix® LOR-syringe, Luer-Slip					
▪ Perifix® Filter 0.2 µm					
▪ Perifix® PinPad					
▪ Perifix® catheter connector					

Espocan® and Perifix® standard with SoftTip	Size (G) / Length (inch)	ø / Length (mm)	Units per box	Code no. (REF) Luer	Code no. (REF) NRFit®
	With quincke-bevel: Spinocan®				
	27 x 5 3⁄8"	0.42 x 136.5*	10	4556747	4556747N-01
	Pencil-point cannula: Pencan®				
	27 x 5 3⁄8"	0.42 x 138.5*	10	4556763	4556763N-01
All sets contain					
▪ Perifix® SoftTip catheter, 3 lateral eyes					
▪ Docking system					
▪ Perican® epidural cannula ø 1.30 mm, 18 G x 88 mm					
▪ Perifix® LOR-syringe, Luer-Slip					
▪ Perifix® epidural flat filter 0.20 µm					
▪ Perifix® PinPad					
▪ Perifix® catheter connector					

*for CSE needle length in NRFit®, please consult our NRFit® brochure

Literature

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2. Ong KB, Sashidharan R. Combined spinal-epidural techniques. Contin Educ Anaesth Crit Care Pain. 2007 Apr;7(2):38-41.

3. Vanderheeren MC, Van de Velde M, Roofthoof E. Initiation and maintenance of neuraxial labour analgesia: A narrative review. Best Pract Res Clin Anaesthesiol. 2024 Sep;38(3):168-175.

4. Tummala V, Rao LN, Vallury MK, Sanapala A. A comparative study-efficacy and safety of combined spinal epidural anesthesia versus spinal anesthesia in high-risk geriatric patients for surgeries around the hip joint. Anesth Essays Res. 2015 May-Aug;9(2):185-8.

5. De Smet, G., Van De Velde, M., Barbe, A. and Roofthoof, E., 2024. Update on the Obstetric Anesthesia Practice in Flanders/Belgium: A 10-year follow-up survey and review. Acta anaesthesiologica Belgica, 75(3), pp.171-186.

6. Kumar D, Khan FA, Hamid M. Spinal needle stabilization using a hand locking maneuver with the conventional back-eye combined spinal-epidural set. Can J Anaesth. 2012 Nov;59(11):1077-8.

7. Vandermeersch E. Combined spinal epidural anaesthesia. KUL. Faculteit geneeskunde other. Leuven: s. n. Leuven: s.n.; 1995. 33p

