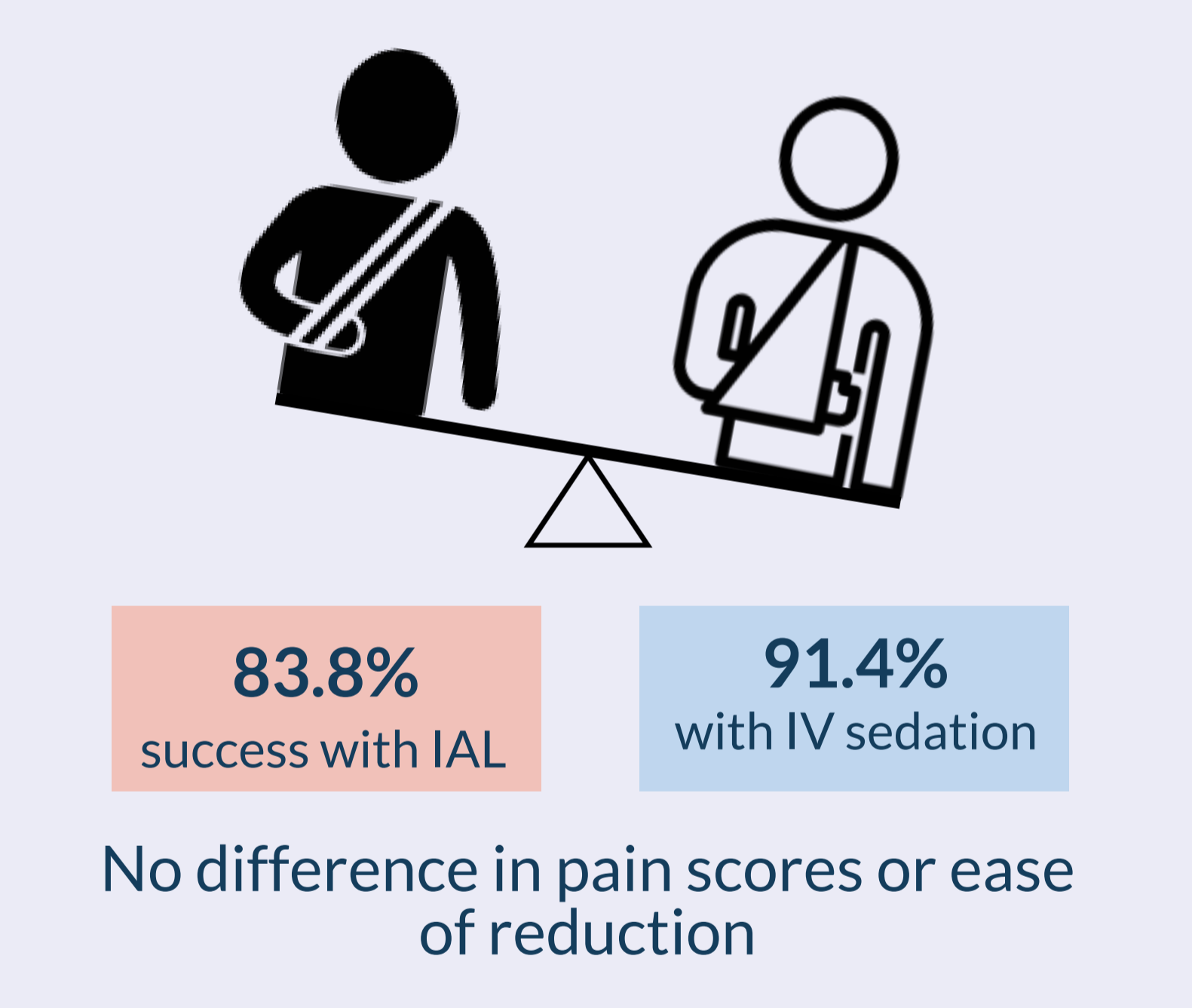
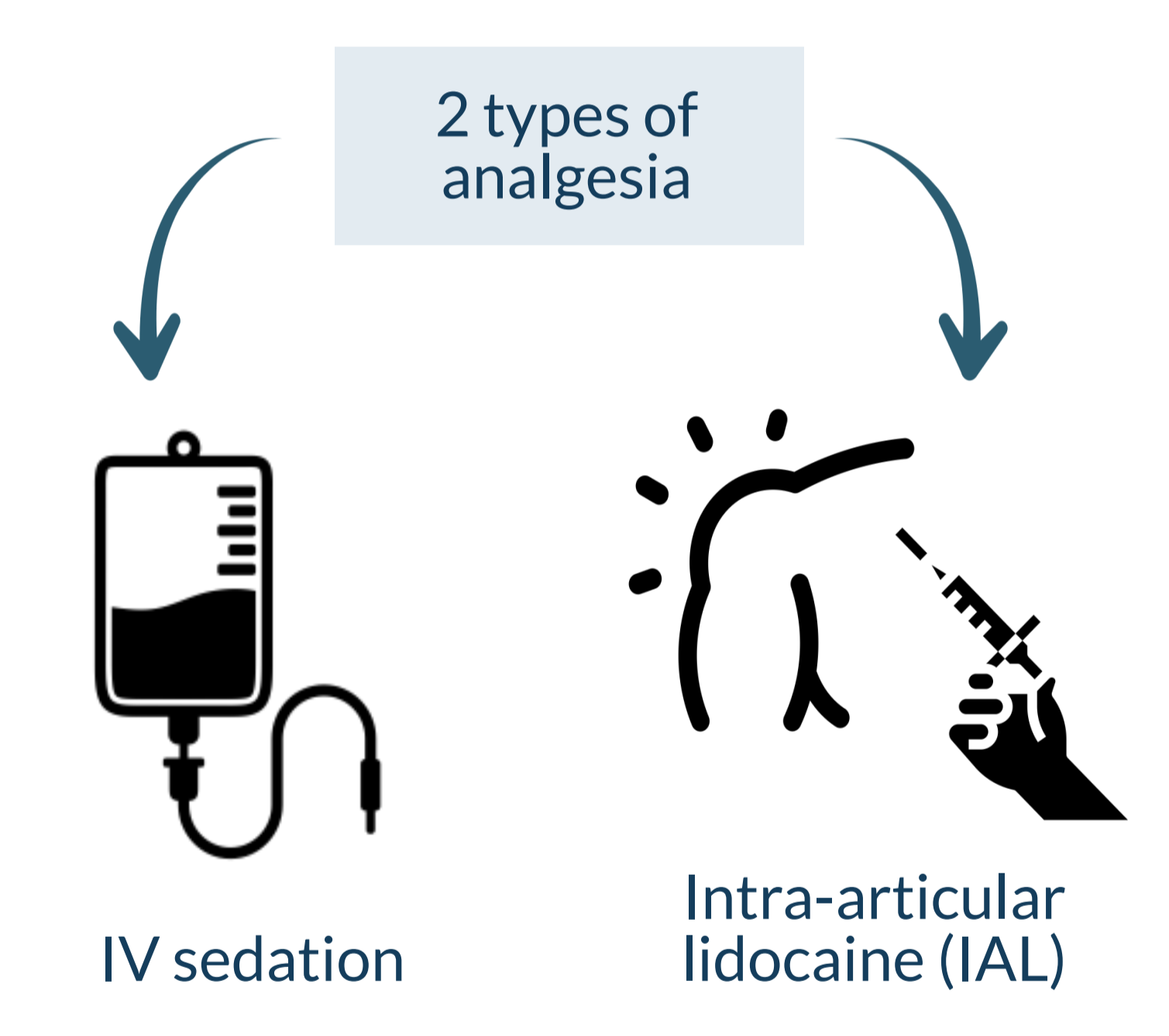


Intra-articular lidocaine versus intravenous sedation for closed reduction of acute anterior shoulder dislocation in the emergency department: a systematic review and meta-analysis

Analgesia is often required for acute reduction in the ED

IAL was found to be as effective as IV sedation

With fewer adverse events and shorter ED length of stay



Several factors may influence your anesthetic choice

IAL was associated with:

- + 8 min
- LOWER SATISFACTION
- 70.5% with IAL
- 90.4% with IV sedation

The complex block contains several elements. At the top, a blue arrow points right with the text 'Several factors may influence your anesthetic choice'. Below this, it says 'IAL was associated with:'. There are two circular icons: one with a clock and '+ 8 min', and another with a dollar sign and a downward arrow. Below these is a red box with the text 'LOWER SATISFACTION'. At the bottom, there are two satisfaction levels: '70.5% with IAL' next to three sad face icons, and '90.4% with IV sedation' next to three happy face icons.

Take Home Message: Intra-articular lidocaine may be an effective alternative to IV sedation for reduction of anterior shoulder dislocations in the ED.

