Opioid withdrawal due to Twiddler syndrome

Figure Intraoperative view

The pump was found backwards in its abdominal subcutaneous pocket, with the intrathecal catheter wired up around the side port. The catheter was severely stretched and ruptured at its insertion place in the lower back. The photograph was taken immediately after explantation of the device.

A 42-year-old man presented to the emergency department with diffuse pain, hot/cold flashes, nausea, jitteriness, and extreme tiredness. He had been treated with intrathecal morphine infusion (4 mg morphine sulfate/day) for failed back surgery syndrome. He had dieted, losing 15 kg. Opioid withdrawal syndrome was suspected; attempts to access the pump's refill port percutaneously to assess residual volume were unsuccessful. Pump revision was urgently scheduled (figure). The recent weight loss had allowed him to manipulate the pump, rotating it so as to dislodge the catheter. Twiddler syndrome,^{1,2} a well-known complication of pacemaker treatment, may occur in intrathecal pumps.

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