

Preferred Techniques for Obstetric Anaesthesia and Analgesia in Czech and Slovak Republic in the Year 2015

– prospective observational survey



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Background and Goal of Study

In the year 2011 OBAAMA-CZ study described anaesthesiological practice for obstetric anaesthesia and analgesia in the Czech Republic. The aim of the OBAAMA-INT study performed in the year 2015 was to describe preferred techniques for the obstetric anaesthesia and analgesia in the Czech (CZ) and Slovak Republics (SR).

Materials and Methods

OBstetric Anaesthesia and Analgesia Month Attributes International (OBAAMA-INT) was held on anaesthetic departments throughout the CZ and SR. With Ethical Committees Approval we aimed to enroll all 149 obstetric departments in CZ and SR and to monitor every case of anaesthetic care in peripartum period during November 2015. Data were recorded to Case Report Form with two parts (Demography 2014 and Case Report) into CLADE-IS (Masaryk University, CZ). The data were described descriptively (mean, median, SD). Fisher's exact test were used in case of categorical variables (SPSS 23, IBM).

Results and Discussion

During the study period, we enrolled 105 participating centers (70 in CZ; 35 in SR) and 3 626 cases. At the time of statistical analysis 3040 were valid. Induced labour was recorded in 21.7 % (22.8% in 2011) cases, Caesarean Section (CS) rate was 24.0%; in CZ 21.6%, in SR 30.4% (24.3% in CZ in 2011). The most preferred type of anaesthesia for CS was neuraxial anaesthesia (62.9 %; 60.7% in CZ and 66.9% in SR (52.4% in CZ in 2011); spinal in 87.8 % (76.0% in 2011)). In case of general anaesthesia (37.1 %) for CS, the predominant reason was urgency (50.0 %). Postoperative analgesia after CS was provided mostly with opioid or non-opioid analgesics (44.8 %; 63.1 %) solely or in combination. There was significant difference ($p = 0.014$) in epidural analgesia rate (10.7 % overall; 12.1% in 2011) between large (> 2000 deliveries per year; 18.2 %), intermediate (1000 -2000; 7.9 %) and small (up to 1000; 7.9 %) centers. Labour analgesia administration was significantly more frequent in primiparas if compared to multiparas ($p < 0.001$), in parturients with BMI < 30 if compared to BMI > 30 ($p = 0.004$) and in term births if compared to pre-term births ($p < 0.001$).

Conclusion

Compare to previously published Czech national data, there is a positive trend in preference of neuraxial anaesthesia for CS, but simultaneously there is no progress in general availability of epidural analgesia for parturients in both republics.

Acknowledgement

Financial Support Grant Identifier: CSARIM201501.
 ClinicalTrials.gov Identifier: NCT02380586

Endorsement

Czech Society of Anaesthesiology and Intensive Care Medicine
 Slovak Society of Anaesthesiology and Intensive Care Medicine

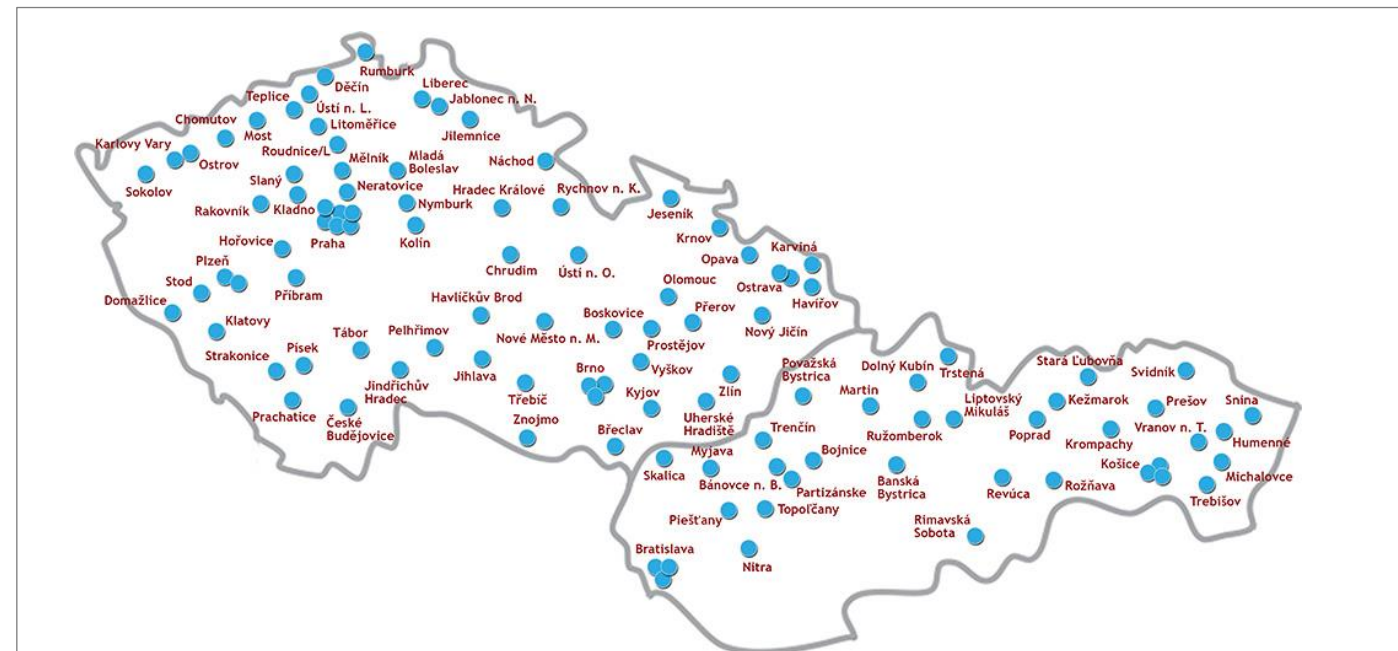


Figure 1 Participating Centers in Czech and Slovak Republics

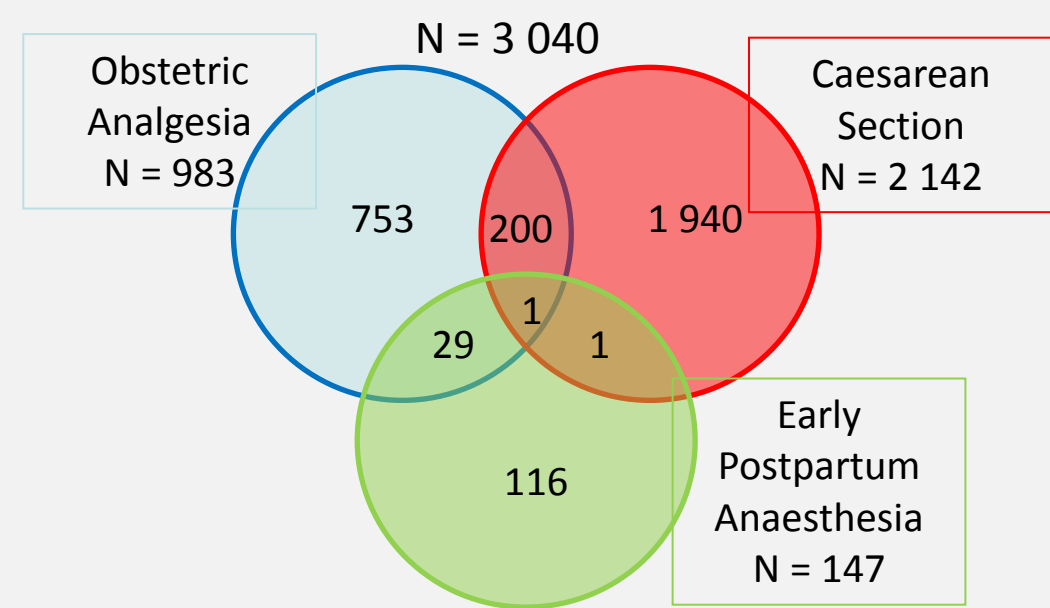


Figure 2 Type of Peripartum Procedures

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