

Background and Hypothesis

- Spanish-speaking Hispanic patients face various sociodemographic disparities
 - More likely to undergo cesarean delivery, experience severe maternal morbidity^{1,2}
- The American College of Obstetricians and Gynecologists recommends epidural anesthesia for labor pain³
- Spanish-speaking patients anticipate using labor analgesia less and are less likely to receive it⁴

Aims

• To identify the knowledge sources patients use to inform themselves, the satisfaction with the information received, and the overall importance of receiving information in Spanish

Hypothesis

 There are currently gaps in the health education Spanish-speakers are receiving prior to hospital admission for labor and delivery

Study Design and Methods

Data Collection

- 30 in-person interviews conducted on the postpartum floor at a high-volume urban hospital with a diverse patient population
- >18 years old, self-identified as native Spanish-speakers

5-minute questionnaire

- Demographics (age, number of total pregnancies/live births, ASA physical status)
- Pre-anesthesia information sources
- Satisfaction with information after anesthesia
- Free response

Results

Patient characteristics

29.5 years old, completed 11.5 years of education, 83.3% received epidural anesthesia

Patient preferences (Table 1)

Characteristic	Total Sample (n=30)
Anesthesia preference pre-admission, n (%)	
Yes	15 (50.0)
Importance of information available in Spanish, n (%)	
Very important	22 (73.3)
Primary source of obstetric anesthesia information, n (%)	
Internet	3 (10.0)
Social media	2 (6.7)
Healthcare professional	20 (66.7)
Family or friends	1 (3.3)
Other	4 (13.3)

Table 1. Patient preferences, satisfaction, and sources of obstetric anesthesia information.

- 27% would have liked to know more information: anesthesia side effects, top-offs, duration
- Labor analgesia was better than anticipated and helped achieve pain control and anxiety relief during labor for 8 patients

Discussion and Conclusion

Discussion

- Spanish-speaking patients would have liked to know more about side effects, timing, and logistics related to obstetric anesthesia
- Quality pre-admission counseling and the distribution of detailed educational materials is critical
- Patients relied on obstetricians and anesthesiologists for health education rather than written material
 - The number of patients who rely on the Internet or social media is not negligible
- Educational programs may increase epidural usage among Hispanic patients by reducing misconceptions about labor anesthesia⁵

Conclusion

 Obstetric anesthesia patients are mainly relying on their healthcare providers for health education, and there is room for improvement in the information they receive

Questions?



References

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