



Frequency of Adherence to Obstetric Anesthesia Best Practices for Cesarean Delivery: A Multicenter Retrospective Cohort Analysis

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Background

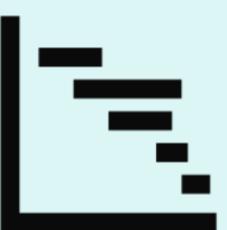
PRACTICE PARAMETERS

Practice Guidelines for Obstetric Anesthesia

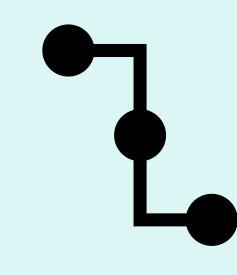
An Updated Report by the American Society of Anesthesiologists Task Force on Obstetric Anesthesia and the Society for Obstetric Anesthesia and Perinatology



Aims:



Estimate adherence to guidelines for cesarean delivery



Estimate association with case- and hospital-level factors



Estimate variability due to case, anesthesiologist, and hospital





Methods

Inclusion Criteria



All cesarean deliveries at MPOG sites



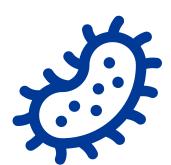
January 2015 to December 2022



Ages 15 to 44



"Best Practices"



Timely antibiotic administration



Maintenance of SBP > 90 mmHg



Avoidance of general anesthesia



Hypothermia prevention



Low-dose neuraxial morphine



Post-spinal phenylephrine infusion



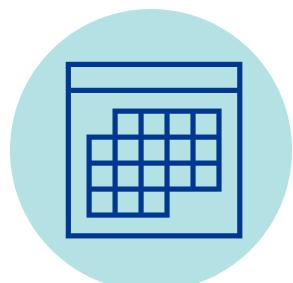
Use of 25G (or smaller) spinal needle







Total CDs: 289,047



Average Age: 31



Average Deliveries: 1,377

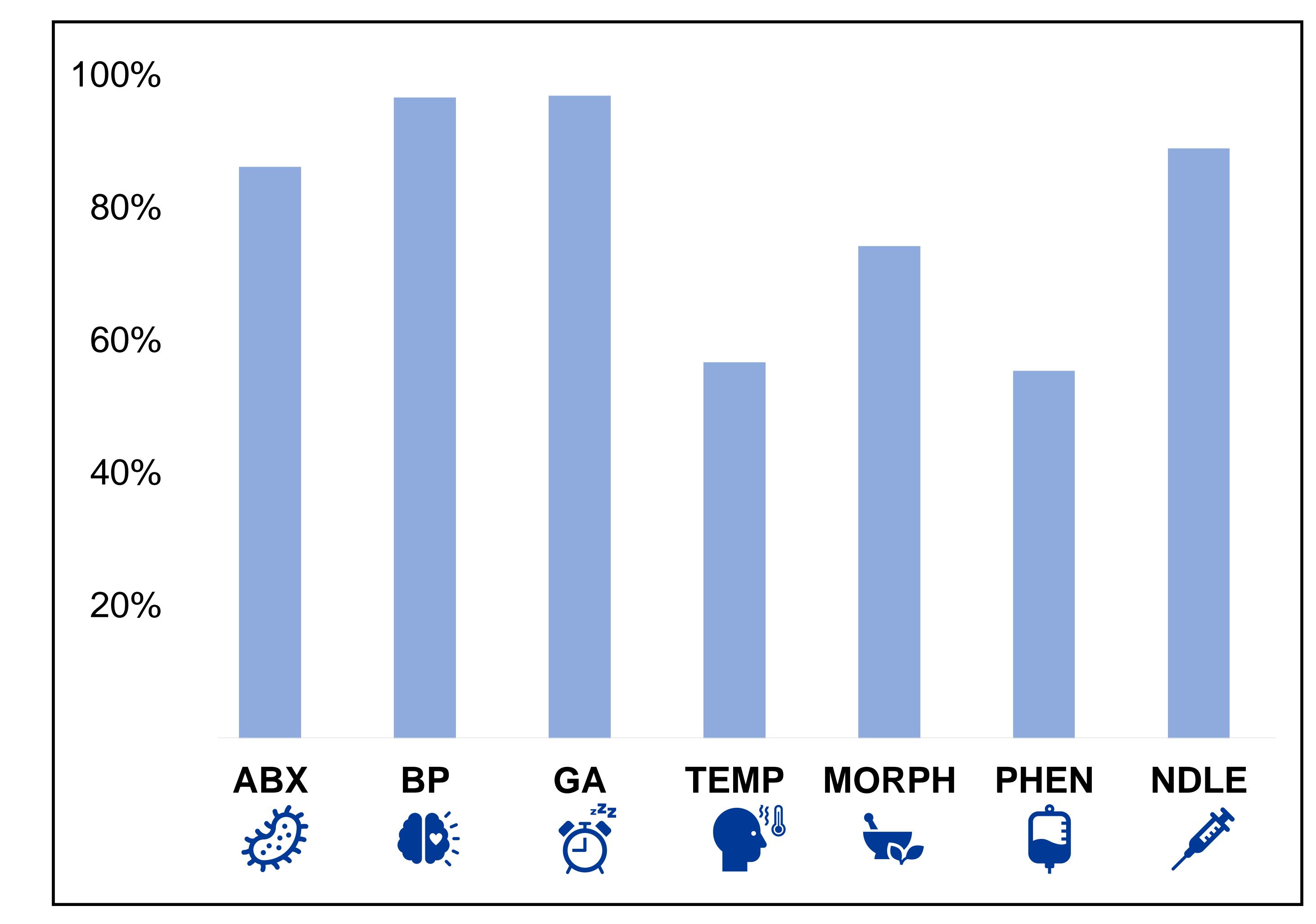


CDs at Hospitals with OB Anes Fellowship: 86,713



CDs at Hospitals with COE Status: 141,455

Rates of Adherence







Adherence Odds Ratios

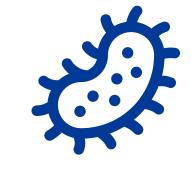
	ABX	BP	GA	TEMP	MORPH	PHEN	NDLE
Race (Reference White)							
Black	0.99	<u>0.85</u>	<u>0.85</u>	<u>0.88</u>	1.03	1.03	0.90
Asian and Pl	1.04	0.95	1.14	1.04	<u>1.22</u>	<u>1.09</u>	1.02
Body Mass Index (Reference BMI < 30 kg/m²)							
BMI 35-40	<u>1.10</u>	<u>0.90</u>	<u>1.28</u>	<u>1.09</u>	0.98	0.98	0.86
BMI 40+	<u>1.08</u>	<u>0.70</u>	<u>1.37</u>	<u>1.12</u>	0.96	1.01	<u>0.37</u>
American Society of Anesthesiologists Physical Status (Reference ASA PS 2)							
ASA PS 3	0.97	1.01	<u>0.77</u>	<u>0.95</u>	0.99	<u>1.15</u>	0.86
ASA PS 4+	<u>0.59</u>	0.78	<u>0.39</u>	<u>0.77</u>	0.97	<u>1.41</u>	<u>0.39</u>

^{**} Underlined values are statistically significant





Adherence Odds Ratios









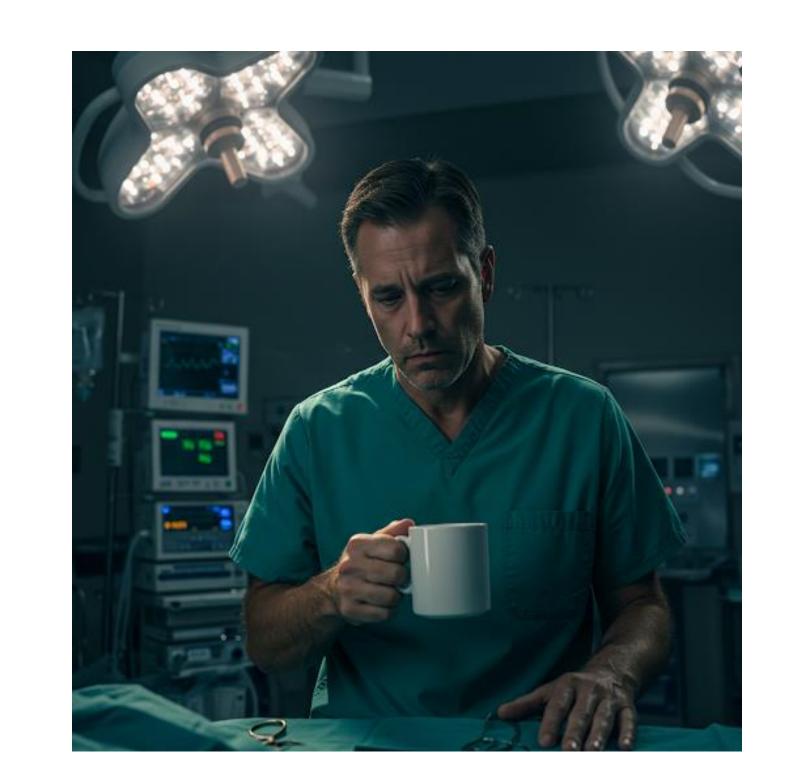






	ABX	BP	GA	TEMP	MORPH	PHEN	NDLE
Time of Day (Reference Day Cases)							
Evening	<u>0.87</u>	<u>1.12</u>	<u>0.81</u>	1.01	<u>1.08</u>	<u>0.60</u>	0.94
Overnight	<u>0.82</u>	<u>1.14</u>	<u>0.78</u>	1.01	<u>1.10</u>	<u>0.44</u>	<u>0.80</u>
Annual Volume (Per 1,000 Additional Patients who Delivered)							
Annual Volume	<u>1.49</u>	1.00	<u>1.35</u>	<u>0.38</u>	<u>2.00</u>	<u>2.70</u>	<u>4.90</u>
Institution Characteristics (Reference "No")							
OB Fellowship	1.00	<u>1.26</u>	0.84	1.15	<u>1.49</u>	<u>4.40</u>	<u>7.10</u>
COE Status	<u>1.18</u>	<u>1.19</u>	<u>1.45</u>	1.00	<u>4.89</u>	0.78	<u>0.14</u>

** Underlined values are statistically significant









"Perfect" Adherence

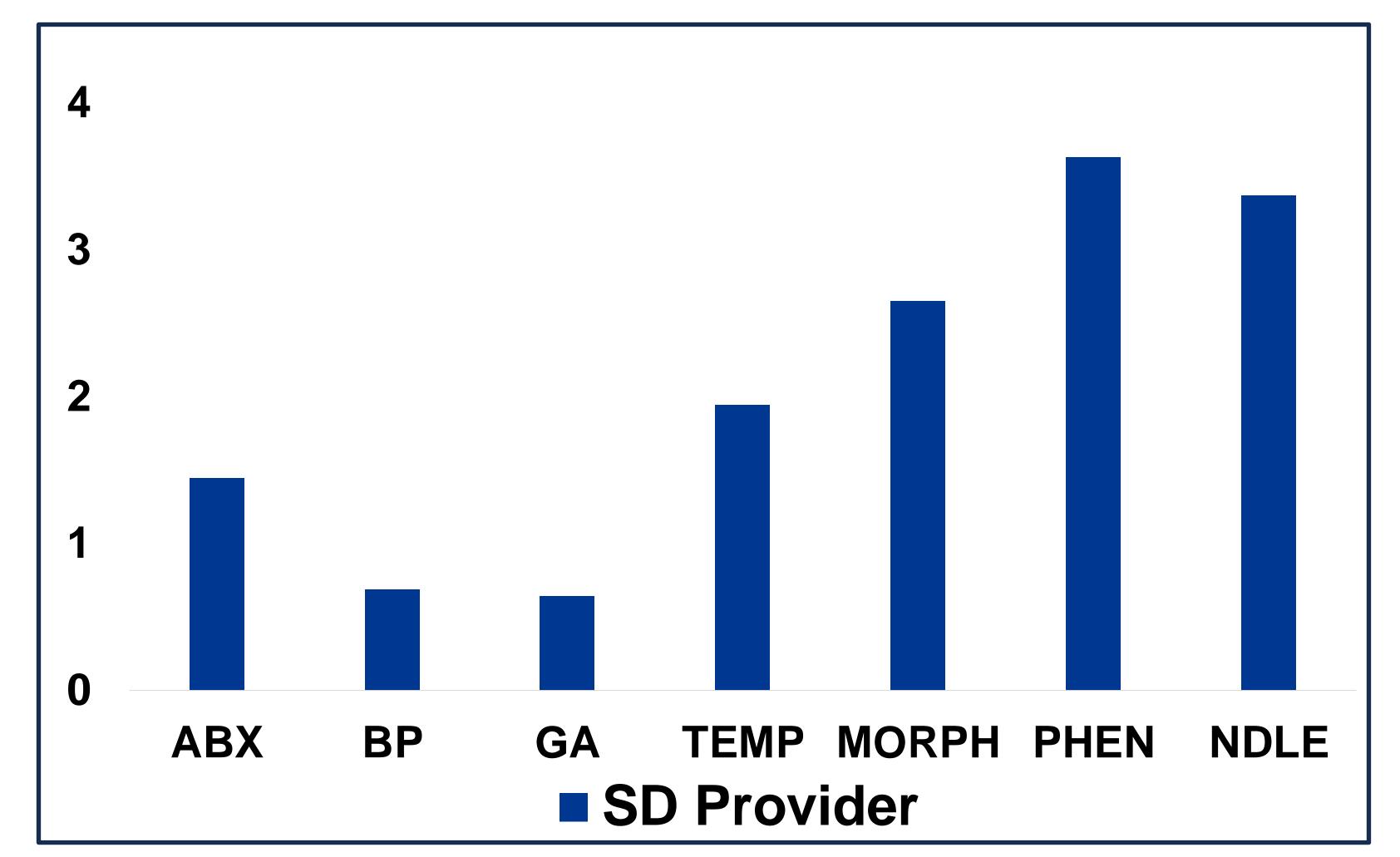
Characteristic	7 out of 7 Adherence
BMI 40+	<u>0.73</u>
Black Race	<u>0.68</u>
Evening Case	<u>0.63</u>
Overnight Case	<u>0.42</u>
Annual Volume	2.70
OB Fellowship	24.2
COE Status*	<u>10.1</u>

^{*} Out of 3,541 total CDs

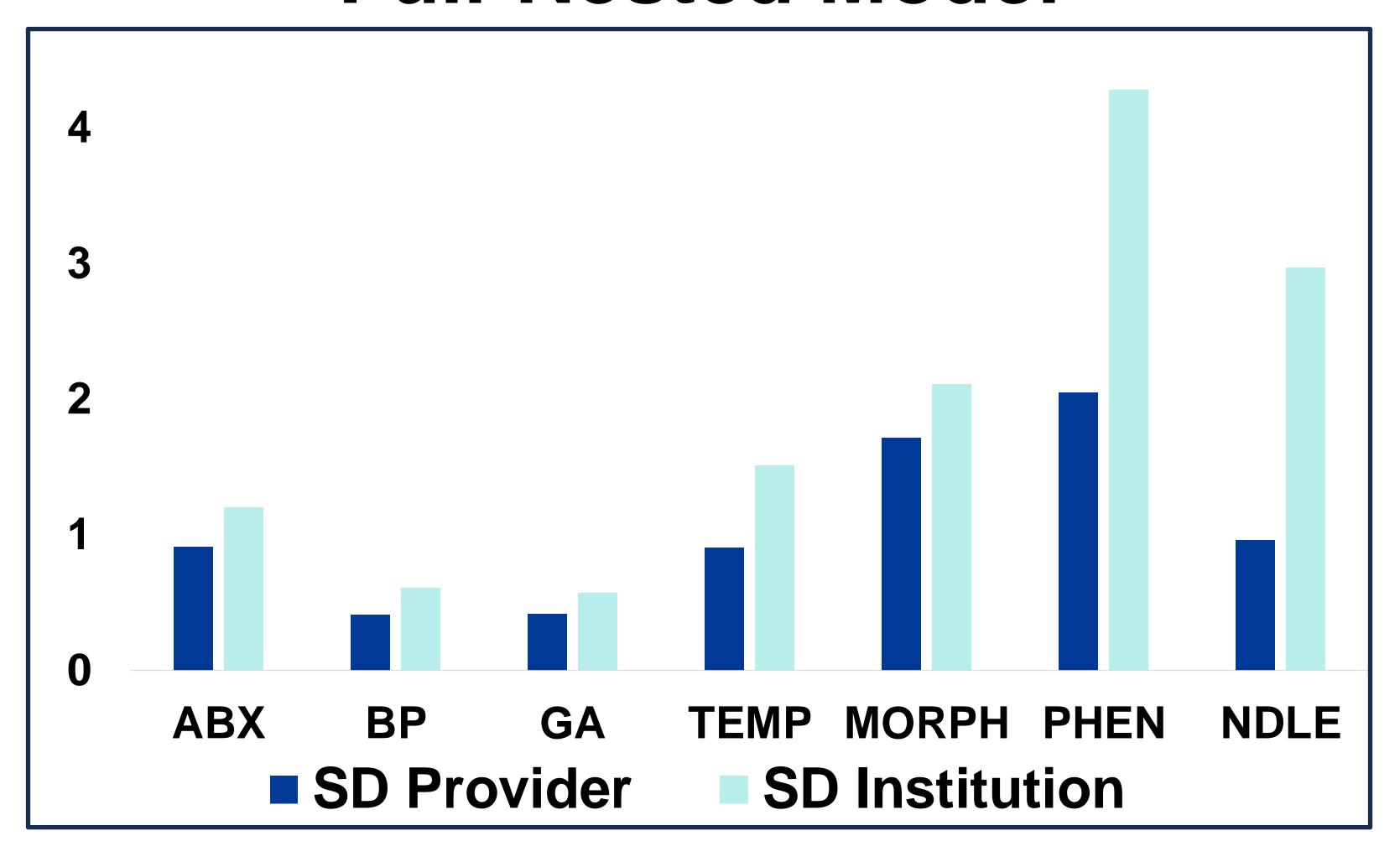
Model Goodness of Fit

Best Practice	Fixed Effects R ²	Provider Nested R ²	Full Nested R ²
ABX	0.08	0.44	0.45
BP	0.02	0.16	0.17
GA	0.06	0.20	0.22
TEMP	0.18	0.60	0.54
MORPH	0.22	0.74	0.75
PHEN	0.25	0.83	0.89
NDLE	0.14	0.80	0.77

Provider-Nested Model



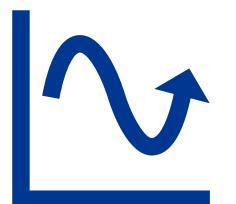
Full-Nested Model







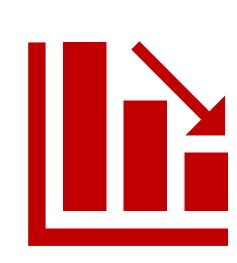
Conclusions



Overall adherence to obstetric anesthesia "best practices" was variable



Factors associated with improved adherence: higher volume,
OB fellowships, and COE status



Factors associated with decreased adherence: race, ASA physical status, and time of cesarean delivery

Future Directions

- Mixed effects model with fellowshiptrained anesthesiologists
- Additional cesarean delivery "best practices"
- Vaginal delivery "best practices"

Co-Investigators

Samuel Justice, PhD | David Stein, PhD Kara Fields, MS | Michael Furdyna, MD Thomas Klumpner, MD | Brandon Togioka, MD Brendan Carvalho, MD | **Sharon Reale, MD**

