

Safety of Deep Sedation for Advanced Second Trimester Uterine Dilation and Evacuation in Medically Complex Patients: A Retrospective Analysis at an Urban Center

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Purpose

1. Evaluate the incidence of anesthesia-related complications during dilation and evacuation using intravenous deep sedation
2. Examining the relationship between gestational age and comorbidities (i.e., substance use disorder, obesity) and their impact on the incidence of anesthetic complications

Study Design and Methods



Methods

- Retrospective chart-review based analysis
- **Cohort selection:** Patients receiving uterine evacuations between 12 0/7w - 27 6/7w GA from 2018 - 2024
- **Data:** Anesthetic complications including hypoxic episodes and conversion to endotracheal intubation
- **Analysis:**
 - Incidence of complications was calculated
 - Fisher's exact test was used to determine the relationship between GA and hypoxic episodes

Results

Overview

Patient Population details see
Table 1:



- N = 1,179 uterine evacuations using deep sedation between 12 0/7 and 27 6/7w GA
- 382 (33%) performed after 20 0/7w GA with **104 (9%) \geq 24 0/7w GA**
- 397 (33%) BMI \geq 30 kg/m², 104 (8.8%) with a documented substance use disorder

Number of Complications (n = 27)

- 1 episode of emesis requiring conversion to endotracheal intubation
- 23 hypoxic episodes
- 3 hypoxic episodes requiring intervention by an anesthesiologist

Incidence of Hypoxic Episodes by GA

- 12 0/7 - 13 6/7 weeks GA (N=239)
n = 3, 1.3%
- 14 0/7 - 23 6/7 weeks GA (N=836)
n = 14, 1.7%
- \geq 24 0/7 weeks GA (N=104)
n = 5, 4.8%

p = 0.08

Incidence of Complications

- Conversion to endotracheal intubation:
0.08%
- Hypoxia requiring intervention:
0.3%

Conclusion and Discussion



- **The incidence of anesthesia-related complications is low**, even in a medically complex patient population
- Our study supports prior findings demonstrating similarly low incidences of anesthesia-related complications; **however, this is the first study to include GA above 24 weeks**
- The risk of anesthesia-related complications **does not significantly increase with increasing gestational age**
- As policy changes affect the demographics of patients seeking abortion care, it is important to consider the management and accessibility of anesthesia at higher GA