

MATERNAL SATISFACTION FOLLOWING SPINAL ANAESTHESIA FOR ELECTIVE LSCS.



Anaesthesiology

KEYWORDS: Adolescent; Anaemia; Dietary intake; Hemoglobin; paleness

FIMSY J BAHAR

RESIDENT DEPARTMENT OF ANAESTHESIOLOGY, YENEPOYA MEDICAL COLLEGE, DERELAKATTE,MANGALORE.

RAMMURTHY K

ASSOCIATE PROFESSOR,DEPARTMENT OF ANAESTHESIOLOGY, YENEPOYA MEDICAL COLLEGE, DERELAKATTE,MANGALORE

ABSTRACT

Patient satisfaction is an important outcome of health care since it is known to influence future uptake of health services and patients' overall health status.. The advantages of regional anaesthesia include an awake mother who can bond immediately with her baby, minimal depression of the newborn, and avoidance of the risks of general anaesthesia (especially failed intubation and aspiration pneumonitis); and spinal anaesthesia specifically has the advantages of its simplicity, small drug dose, low failure rate (about 3%) and rapid onset. **OBJECTIVE:**To evaluate maternal satisfaction following spinal anaesthesia,if they wear able to bond immediately with their babies and weather the parturient will opt for spinal anaesthesia in the future. **MATERIALS AND METHODS:** A prospective questionnaire study was conducted following approval of institutional ethical committee, 200 patients belonging to "American society of Anaesthesiology" (ASA) grade I & II , aged between 18 to 40 years, who has underwent elective LSCS within 24 hours were selected. All these patients received anaesthesia in a uniform fashion. . Close monitoring for any complication should be done. 24 hours within surgery these patients will be presented with a questionnaire. **RESULT:** In our study it was observed that the ratio of parturient receiving spinal anaesthesia the first time to not was almost same. Out of 200 patient 5 patients experience pain following spinal anaesthesia of which only one parturient scored above 5 on the visual analogue scale.96% of the patients did not experience any form of discomfort including nausea and vomiting.99% of parturient could immediately bond with their babies and would opt for spinal anesthesia in the future. **CONCLUSION:** 99.5% parturient were able to bond immediately with their babies .Majority(98.5%) of our patient conveyed that they will opt for spinal anaesthesia in the future. 96% participants scored the anaesthesia good.3% scored it average and the remaining 1 % scored it poor

INTRODUCTION:

"Giving birth should be your greatest achievement not your greatest fear"

-Jane wiedeman"

There has been public health concern for over 30 years about the increasing cesarrian rate.

Although a global phenomenon, the timing and rate of increase has differed between countries and marked differences in rates persist¹.one out of every four deliveries are via cesarrian section².the mode of anaesthesia for cesarrian section depend on multiple factors like emergency of the surgery,reason for surgery,comorbidity as well as surgeons/anaesthetist's preference. Anaesthesiologists always opt for the method that is believed to be safest,appropriate and most comfortable for the mother and at the same time least depressant to the fetus . Providing the optimal working conditions for the obstetrician is also one of the aims. Regional anaesthesia fulfils all these criteria. The advantages of regional anaesthesia include an awake mother who can bond immediately with her baby, minimal respiratory depression of the foetus, avoidance of undue airway manipulation and polypharmacy. The risk of failed intubation and aspiration; and spinal anaesthesia specifically has the advantages of its simplicity, small drug dose, low failure rate (about 3%) and rapid onset.

Patient satisfaction is an important outcome of health care since it is known to influence future uptake of health services and patients' overall health status Patient satisfaction with health care is a determinant, yet sometimes overlooked, component in the assessment of successful health care delivery. It is often overshadowed by morbidity and mortality rates, modality success or failure rates, and provider satisfaction³.Very few Indian

Materials and methods

A prospective questionnaire study was conducted following approval of institutional ethical committee, 200 patients belonging to "American society of Anaesthesiology" (ASA) grade I & II , aged between 18 to 40 years, who has underwent elective LSCS within 24 hours were selected. . All these patients received anaesthesia in an uniform fashion. . Close monitoring for any complication should be

done. 24 hours within surgery these patients will be presented with a questionnaire .The following were the criteria

studies are there at present assessing maternal satisfaction following spinal anaesthesia and the outcome of an unsatisfied anaesthesia in the future uptaking of regional anaesthesia

Inclusion criteria

- Patients undergoing elective lscs.
- Female patients aged between 18-40years
- ASA grade 1 and 2

Exclusion criteria

- .ASA grade 3 and 4
- Fetal distress
- Bleeding disorder
- On anticoagulant
- Patient who needs post op ventilation . The study will be analyzed using SPSS .22 version.

Results and observation:

	IST SPINAL ANAESTHESIA	EXPERIENCE PAIN	POST-OP NAUSEA/VOMITING	ANY OTHER DISCOMFORT	IMMEDIATE BONDING	OPT FOR SPINAL IN THE FUTURE
NO	99(49.5)	195(97.5)	192(96)	193(96.5)	1(0.5)	3(1.5)
YES	101(50.5)	5(2.5)	8(4)	7(3.5)	199(99.5)	197(98.5)
Total	200(100)	200(100)	200(100)	200(100)	200(100)	200(100)

Table:1

	SPECIFICATION	Valid Percent
NIL	193	96.5
BACKACHE	2	1
SHIVERING	5	2.5
Total	200	100



pie chart:1



pie chart:1

In our study it was observed that the ratio of parturient receiving spinal anaesthesia the first time to not was almost same. Out of 200 patient 5 patients experience pain following spinal anaesthesia of which only one parturient scored above 5 on the visual analogue scale. 96% of the patients did not experience any form of discomfort including nausea and vomiting. 99% of parturient could immediately bond with their babies and would opt for spinal anaesthesia in the future.

DISCUSSION:

Patient satisfaction following spinal anaesthesia is an important tool in assessing quality of anaesthesia; it also helps anaesthesiologist understand the expectations of the patients towards the technique and provides a scope in further improving the experience. In our study we have chosen parturient as they are ideal candidature in assessing satisfaction in a smaller study. Their satisfaction will be directly reflected on their immediate baby bonding. In our study we have included 200 patient undergoing elective LSCS. The average age group of the patients were 26 years. All 200 patients were able to successfully participate and complete the questionnaire. 50% of the patients were receiving spinal anaesthesia for the first time. 5 patients experience pain following anaesthesia when asked to score by VAS only 1 out of them scored more than 5, who experienced pain at almost the end of the surgery she was given injection fentanyl 1.5mcg/kg iv along with local infiltration. Nausea and emetic episode still persist as the most common following anaesthesia and surgery. Most patients find PONV more distressing than post operative pain. 4% of the participant experienced nausea and vomiting. Other discomfort experienced by the patients were back pain and shivering. None of the patients experienced headache. 99.5% were able to bond immediately with their babies. 0.5% could not be the probable cause of which was again nausea and vomiting. Majority (98.5%) of our patient conveyed that they will opt for spinal anaesthesia in the future, in contrary to the study conducted by Rashid S et al⁹. 96% participants scored the anaesthesia

good. 3% scored it average and the remaining 1% scored it poor. Certainly attainment of 100% satisfaction would be ideal, but it is likely a certain number of people will be always unsatisfied, regardless of the outcome. Most patients want to please their carers and may conceal or under-rate, dissatisfaction or other concerns^{7,8,9,10}.

Conclusion:

99.5% parturient were able to bond immediately with their babies. Majority (98.5%) of our patient conveyed that they will opt for spinal anaesthesia in the future. 96% participants scored the anaesthesia good. 3% scored it average and the remaining 1% scored it poor

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