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Factors Influencing Selection of Anesthesia types among Pregnant Mothers who Underwent Cesarean Section in Jimma University Specialized Hospital

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Abstract

Background: Caesarean delivery is one of the most commonly performed surgical procedures all over the world. The choice of anesthesia for cesarean section is regional and general anesthesia. Some of the factors influencing the choice of anesthesia type for cesarean section are the degree of urgency, maternal and fetal condition, and willingness of the mother, the experience of the anesthetists, and availability of all anesthesia equipment. Hence, the aim of this study was to identify factors influencing types of anesthesia selection for cesarean section.

Methods: A prospective cross-sectional study design was conducted on factors influencing the choice of anesthesia type for mothers who underwent cesarean section in Jimma specialized hospital from April to June, 2018. All mothers who underwent cesarean section were included. Regular supervision and follow-up were made. Descriptive statistics were used to identify factors influencing types of anesthesia. Data was entered and analysis was done using SPSS version 25.

Result: A total of 65 pregnant mothers who underwent cesarean section were included. Nearly half of them, 32 (49.2%) were between 26 years-30 years old. Among all, 52.3% were undergone under spinal anesthesia. The Majority, 78.5% of the mothers underwent cesarean sections were emergency in which 40% underwent under general anesthesia and 38.5% under spinal anesthesia. Ketamine, 61.3% took a majority of induction agents during general anesthesia. 16.1% of pregnant mothers who came with fetuses in distress and hypotension were given general anesthesia.

Conclusion: Generally, almost the every mother who came with stable maternal and fetal condition underwent spinal anesthesia. Three-fourth of emergency cases were undergone general anesthesia. Therefore, to reduce the use of general anesthesia in elective cases.

Keywords: Types of anesthesia • Influencing factors pregnant mothers • Cesarean section

Introduction

Caesarean delivery is one of the most commonly performed surgical procedures all over the world. The choice of anesthesia for caesarean section is regional and general anesthesia depending on maternal and fetal condition and other factors [1]. The choice of anesthesia for any caesarean section depends on multiple factors such as the indication and urgency of cesarean section, Surgeons experience, history of previous cesarean section, maternal and fetus pre-operative conditions and types of uterine incision [2].

Regional anesthesia technique is currently the most commonly used method for providing anesthesia for Caesarean section and also can used in conditions like preeclampsia and placenta previa which was considered an indication for general anesthesia. Most common indication for general anesthesia are urgency of cesarean section, maternal refusal of regional techniques, inadequate or failed regional attempts, and regional contraindications including coagulation or spinal abnormalities [3].

Although the use of general anesthesia for cesarean delivery has dramatically decreased during recent decade, it is still necessary for the management of several situations, including maternal hemorrhage, overt coagulopathy, and life treating fetal condition and a case in which patients refused regional anesthesia [4].

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The Royal College of Anesthetists in the United Kingdom has proposed that more than 95% of elective caesarean deliveries and more than 85% of emergency caesarean deliveries should be performed using regional anesthetic techniques [5].

Nevertheless, there is no adequate information regarding to this topic particularly in Ethiopia. The present study was conducted to assess the factors influencing types of anesthesia selection who underwent cesarean section in Jimma university specialized hospital, which is found in western part of Ethiopia.

Materials and Methods

Study area and setting

The study was conducted at Jimma University Specialized Hospital which is located in Jimma town 352 km southwest of Addis Ababa. It is one of the oldest public hospitals in the country established in 1930 E.C by the Italians for the service of their soldiers and used to be named as St. Mary Hospital. It is one of the oldest teaching hospitals in the country giving services to people living in Jimma zone and currently it is the only teaching and referral hospital in the southwestern part of the Ethiopia. It provides services for approximately 15,000 inpatients, 160,000 outpatient attendants, 11,000 accidents and emergency cases, and around 6000 conducted in 2015 coming to the hospital from the catchment area. Currently, JUSH has about 21 units and 503 beds. The maternity ward is one that has around 65 beds and provides delivery service for the community around the area.

Study design and period

Hospital based prospective cross sectional study design was conducted in Jimma University Specialized Hospital from April to June, 2018.

Study design

Cross sectional study design was used.

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Source population

All mothers who gave birth at Jimma University Specialized Hospital.

Study population

All women who delivered by C/s within specified study period.

Sampling technique

Consecutive sampling method was conducted.

Data collection tools and procedure

A structured questionnaire was used to collect information about the socio-demographic characteristics of respondents like age of mother, maternal and fetal condition, and urgency of c/s, type of anesthesia administered and anesthetic related complication of c/s. The questionnaire was developed by English to collect the data.

Data quality assurance

Pretest was done on 5% of sample size. The collected data will be checked for its completeness, accuracy, clarity and consistency every day by the investigator. Data collectors were trained on each item in the study tools. During data collection, regular supervision and follow up was made.

Data analyzing and processing

Data was checked manually for completeness and then was coded and entered in to Epi info version 7 computer softwares by investigator and exported to SPSS version 20 computer programs for cleaning and analysis. Descriptive statistics was used to summarize data and tables.

Ethical consideration

Ethical clearance was obtained from research and ethical review committee of institute of health science, Jimma University. After explaining the importance of study, an informed verbal consent was obtained from the study participants. Confidentiality of the participants' information was kept throughout the research processes.

Operational definition

Elective C/s included all cases performed as scheduled for the day.

Emergency C/s included non-scheduled cases.

General anesthesia is a combination of loss of consciousness: amnesia: analgesia and muscle relaxation.

Spinal anesthesia is local anesthetic drug administered in the subarachnoid space.

Result

Age distributions of respondents

A total of 65 pregnant mothers who underwent c/s were involved. Nearly half of the pregnant mother, 49.2% was found between 26 years-30years of age (Table 1).

Table 1. Age distribution of mother who underwent C/S in Jimma University specialized hospital from April to June, 2018 (n= 65).

Variable	Category (in years)	Frequency	Percentage (%)	
Age	<20	6	9.2	
	21-25	10	15.4	
	26-30	32	49.2	
	31-35	9	13.8	
•	36-40	6	9.2	
-	>41	2	3.1	

Maternal and fetal pre-operative conditions and types of anesthesia selection

Majority of mothers who were stable pre-operatively delivered under general anesthesia, 22 (71%) and spinal anesthesia 33 (97%). All mothers with Pre-operative hypotension (16.1%) and APH (6.4%) were delivered under general anesthesia. 25 (80.6%) and 32 (94.1%) of the fetus who were stable pre operatively delivered under general anesthesia and spinal anesthesia respectively. Those fetuses with distress, 16.1% all delivered under general anesthesia (Table 2).

Distribution of urgency of cesarean section and type of anesthesia selection

Elective c/s were done for 14 (21.5%) and the rest 51 (78.46%) were emergency cesarean section. 5 (7.7%) of elective cases underwent general anesthesia and the rest spinal anesthesia. Majority, 26 (40%) of emergency cases were delivered under general anesthesia (Figure 1).

Distribution of type of induction agent used for General Anesthesia

Table 2. Distribution of maternal and fetal pre-operative condition and type of anesthesia given in Jimma University specialized hospital from April to June, 2018.

Conditions		Type of anesthesia				
		General anesthesia		Spinal anesthesia		
		Frequency	Percentage (%)	Frequency	Percentage (%)	
Maternal	Stable	22	71	33	97	
	Hypotension	5	16.1	-	-	
	APH	2	6.4	-	-	
	Others	2	6.4	1	2.9	
	Total	31	-	34	-	
Fetal	Stable	25	80.6	32	94.1	
	Fetal distress	5	16.1	-	-	
	Others	1	3.2	2	5.9	
	Total	31	-	34	-	

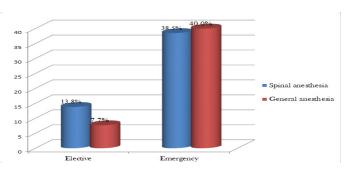


Figure 1. Distribution of urgency of cesarean section and type of anesthesia given in Jimma University specialized hospital from April to June, 2018.

Percentage

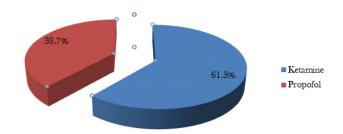


Figure 2. Distribution of type of induction agent used for General anesthesia during C\S in Jimma University specialized hospital from April to June, 2018.

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According to the study, those cases done under general anesthesia, ketamine was the first induction agent by 19 (61.3%) and propofol is 12 (38.7%) (Figure 2).

Discussion

The findings of this study showed that maternal condition and fetal conditions were among the main factors that affect selection of anesthesia types. Therefore, identifying factors affecting selection of anesthesia types is very important.

Current study showed that among elective cases only 7.7% of them underwent cesarean section under general anesthesia. This study coincides with the study 5% in the United States, 4% in Belgium and 10% in Germany. But 30% in Spain, 34% in Italy and 44% in Czech Republic were use general anesthesia for elective cesarean delivery [6].

This study found that 78.5% of cesarean section was emergency and all fetal distress women were done under general anesthesia. Study done in Norway in April 2003 shows that out of 2778 deliveries, cesarean section accounts 69.7% out of this emergency c/s accounts 64.3% while elective c/s accounts 5.4%. The common indication for c/s during this period were fetal distress (21.9%), Preeclampsia (6.2%) and maternal request (7.6%) [7].

In this study, out of the pregnant mothers who underwent cesarean section 21.5% were elective and 78.5% were in emergency. The types of anesthesia given were 47.7% general anesthesia and 52.3% spinal anesthesia. Also, a retrospective analysis of c\s in maternity hospital in Eretria showed that out of the total 8293 deliveries, cesarean section account (11.2%) out of these elective c\s account (7.8%) and (92.2%) were emergency c\s. The type of anesthesia given were general anesthesia (63.6%) and spinal anesthesia (36.4%) [8].

In our study, 21.5% were elective cesarean section and 49.2% of the mother's age was between 26-30 years. Also, the study done at Tikur Anbessa teaching hospital in 1991 to 1992 out of the total deliveries of 3237, 10% were cesarean section. Among these, 82% were emergency c\s and 18% were elective c\s. Majority, 57% of the age's group of mother was between 20 years-30years [9-10].

Conclusion

Three fourth of all cesarean section were done as emergency; out of these 40% were done under general anesthesia. The most important indications for general anesthesia were fetal stress. The hospital has to supply all the required material for spinal anesthesia and the Anesthetist has

to select regional anesthesia to reduce maternal and fetal complications.

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