

# Update in Obstetric Anaesthesia in New Zealand

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### What is new in Obstetric Anaesthesia in New Zealand 2020?

Like with most subspecialties, our year has been dominated by COVID-19. However, several other key developments have occurred, or are in progress.

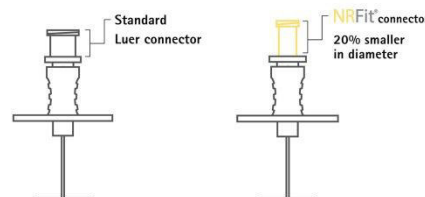
#### NRFit

Following a myriad of reports of wrong route administration errors, the International Organization for Standardization (ISO) developed the ISO 80369 engineering standards to specify the design of small-bore connectors for various clinical applications that are dissimilar.

Non-epidural medications (e.g., potassium chloride, antibiotics, vinca alkaloids) have inadvertently been administered into the epidural or intrathecal space. Some of these errors can result in permanent neurological and cardiac deficits, and death.

Medical device connectors for neuraxial applications are changing from Luer connectors to ISO 80369-6-compliant connectors. Compared with Luer system, NRFit syringes have

- 20% smaller connector diameters
- Smaller collar and tip (but same inner diameter)
- A tip that is flush with the collar (Luer tip extends beyond).



Rollout of this new system hasn't yet been given a date for completion by ANZCA, however trials are occurring across Australia and NZ. ADHB is leading the way in NZ, with others to follow. Currently there are no NRFit-Luer adapters available, which mandates a complete changeover of all equipment at once.

#### Patient education - Breastfeeding and Anaesthesia

There are now three NZ Based Patient education sites available for directing women to. The newest addition is [www.breastfeeding-anaesthesia.info](http://www.breastfeeding-anaesthesia.info), which is hosted by Dr Caroline Ariaens – SMO at Waikato DHB. This site provides information for both women and healthcare professionals on how to approach anaesthesia with a breastfeeding woman.

NOA in conjunction with the NZSA is in the process of establishing a central patient information page which will host a link to this site as well as [www.yourlabouryourway.co.nz](http://www.yourlabouryourway.co.nz) and [www.yourcsection.co.nz](http://www.yourcsection.co.nz). This page will be available to access via a QR code, with plans for NOA to provide a business card template to any interested DHB.

#### Obstetrics + COVID

Most recently, RANZCOG has released an update (August 7) with the following key statements.

- N95 masks are required for healthcare workers caring for women with suspected or proven COVID-19 infection in labour, birth and caesarean section
- The patient who has proven or is suspected to be at high-risk for COVID-19 infection should be encouraged to wear an appropriate mask, recognizing that this may not be tolerable.
- During the third stage, retain protective equipment and follow usual practice, including, where appropriate delayed cord clamping, controlled cord traction, skin to skin contact and initiation of breastfeeding.

The Ministry of Health is yet to amend its stance on PPE requirements for care of known or suspected COVID-19 positive women in labour. Regional policy currently differs.

### **Gastric acid prophylaxis**

Obstetric patients are considered at increased risk of aspiration of gastric contents during general anaesthesia when laryngeal reflexes are reduced. This is associated with significant morbidity and mortality. Obstetric patients are at a higher risk compared to the non-pregnant population because high levels of progesterone cause relaxation of the musculature at the gastro-oesophageal junction and increased gastric residual volume. In addition, there is higher intra-gastric pressure due to the gravid uterus, which causes gastric contents to be forced upwards. Studies have shown that the administration of parenteral opioids in labour is associated with delayed gastric emptying.

Since the removal of Ranitidine from use there has been a universal switch to Omeprazole use across all DHBs, although there is variation in practice. Some are using Omeprazole routinely whereas others reserve it for high risk women only.

### **Tramadol**

The AAGBI (now AoA) has released guidance on the use of Tramadol in breastfeeding.

- Limited to inpatient use only
- Monitoring for respiratory depression in the neonate

This raises the question regarding appropriate drugs for discharge for those women requiring additional analgesia beyond NSAIDs and Paracetamol.

- Continue Tramadol (many DHBs doing this)
- Sevredol (also associated with Neonatal depression)

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