**Título:** Obstetric anesthesia: 1 year of experience in SARS-CoV-2 pandemic

**Autores:** Inês Silva, Diana Fonseca, Catarina Sampaio

**Instituições:** Centro Hospitalar Universitário de São João, Porto

**Área Terapêutica/Tema:** Abordagem do doente COVID-19

**Resumo:**

Introduction: Coronavirus disease 2019 was declared a pandemic in March 2020. One year after, more information is available on anesthetic management of infected pregnants and their outcomes, which allows improved health care.

Methods: An observational retrospective study was conducted since the beginning of SARS-CoV-2 pandemic in order to report the clinical experience in a tertiary hospital during a year of pandemic.The aim was to characterize the patients and their outcomes after different anesthetic/analgesia techniques. All parturients with positive test for SARS-CoV-2 were included. Demographic and epidemiological context, laboratorial tests and radiological imaging at admission were collected. Analgesic/anesthetic procedures, surgery related data and maternal and neonatal outcomes were described. Partial results from the first four months were already published and included in this final report.

Results: Forty four patients were included. Asymptomatic patients (41%) and premature newborn frequency (13,6%) was superior to the reported in our previous study. Laboratorial alterations, mainly leukocytosis, lymphopenia or thrombocytopenia were similar to other reports. Cesarean delivery and neuraxial analgesia/anesthesia were conducted in most of the cases, as in other internationational reports. Of the patients submitted to epidural analgesia, most of them remained under patient controlled epidural analgesia until birth. Three cases underwent general anesthesia with tracheal intubation. In contrast to what previously reported, four newborns were positive for SARS-CoV-2. Seven percent of parturients were admitted in the intensive care unit and only one puerpera was readmitted due to her respiratory insufficiency. No neonatal complications or critical events were reported.

Conclusion: In our study, regional anesthesia techniques for labor analgesia/anesthesia were applied in 91% of the cases. No maternal or neonatal anesthetic complications were verified. This study was the first national characterization of anesthetic experience in pregnant women after one year of SARS-CoV-2 pandemic and may be helpful to improve specific health care to these patients in accordance with their singularities.

References:

Silva, A. I., Fonseca, D., Castro, J., Lusquinhos, J., & Sampaio, C. (2021). Parturients with COVID-19 undergoing anaesthesia or analgesia for labor, delivery or cesarean section: a retrospective observational study. Revista Da Sociedade Portuguesa De Anestesiologia, 29(4), 192–198.

Herman JA, Urits I, Kaye AD, Urman RD, Viswanath O. COVID-19: Recommendations for regional anesthesia. J Clin Anesth. 2020;65:109885.

Bauer M, Bernstein K, Dinges E, Delgado C, El-Sharawi N, Sultan P, et al. Obstetric Anesthesia During the COVID-19 Pandemic. Anesth Analg. 2020;131:7–15.

Kelava M, Alfirevic A, Bustamante S, Hargrave J, Marciniak D. Neuraxial Procedures in COVID-19–Positive Parturients: A Review of Current Reports. Anesth Analg. 2020;131:e22–e22.