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Research Artícle

Maternal Satisfaction and Causes of Dissatisfaction after Spinal Anesthesia in Caesarean Cases - Survey

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Abstract

Spinal anesthesia is very good for caesarean cases. The study was conducted to know the maternal satisfaction after spinal anesthesia and what are the common causes of dissatisfaction. This was a cross sectional study and total 116 patients were observed for a period of 3 months. A pre-structured questionnaire was filled on first postoperative day. The data recorded about pre-anesthetic counseling done, number of pricks for spinal anesthesia, complications and side effects were noted. Patient satisfaction rate (84.48%) was good with spinal anesthesia but it can be further improved by proper pre-anesthetic counseling and clinical skill of anesthetist and postoperative counseling. The main causes of dissatisfaction were multiple pricks.

Key words: spinal anesthesia, caesarean section, satisfaction

Introduction

Spinal anesthesia is most commonly used anesthesia for caesarean section by anesthetist. The reason for this is because it is very safe, does not cause fetal depression and prevent the risk of general anesthesia. In this study we wanted to see the patient satisfaction rate with spinal anesthesia and what are the causes of dissatisfaction. However some patients prefer general anesthesia because of discomfort.

Material and method

Cross sectional study was done in the Department of Obstetrics and Gynecology, IMS, BHU, Varanasi.

Total 116 patients were observed. The patients who underwent caesarean section under spinal anesthesia were included.

A pre structured questionnaire was filled on first postoperative day and following points were observed:

- 1. Pre-anesthetic counseling
- 2. Number of pricks
- 3. Patient satisfaction
- 4. Side effects
- 5. Causes of dissatisfaction.

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Results

In our study 84.48% patients were satisfied with spinal anesthesia. In 67.24% patient with single prick spinal anesthesia was given. In 22.41% it was done in 2to3 pricks and in 10.34% it was done in more than 3 pricks. In 3.44% of patients, spinal anesthesia failed and general anesthesia was given. Pre-anesthetic counseling was done in 81.04% cases.

Spinal headache was observed in 12.06% nausea & vomiting was present in 22.41%. Spinal

hypotension was reported in 0.86%. Numbness in lower limb was present in 3.44% cases.

The cause of dissatisfactions were multiple pricks (10/34%), inadequate analgesia (2.58%), failed spinal anesthesia (3.44%) and backache (22.41%).

Limitations

There are certain limitations of this study. Some patients to please the doctors respond satisfaction. Backache, vomiting can be because of other causes also. It also depends on the skill of the anesthetist.

FACTORS OBSERVED	Patients (116)	Percentage
Satisfied patients	98	84.48%
Number of pricks Single In 2to3	78 26	67.24% 22.41%
>3pricks	12	10.34%
Conversion to GA	04	3.44%
Pre anesthetic counseling	94	81.03%

Table1

Table 2

Side effects	Number of Patients	Percentage
Spinal headache	14	12.06%
Nausea and vomiting	26	22.41%
numbness	4	3.44%
backache	26	22.41%
Spinal hypotension	01	0.86%

Table 3

Causes of dissatisfaction	Number of patients	percentage
Multiple pricks >3	12	10.34%
Backache	26	22.41%
Inadequate analgesia	3	2.58%
Failed spinal anesthesia	4	3.44%

Discussion

Our study shows satisfaction rate with spinal anesthesia was 84.48%. The causes of dissatisfaction were multiple pricks (10.34%) and

failed spinal anesthesia (3.44%) cases. A study done by Dharamlingam et al showed 97% satisfaction rate with spinal anesthesia. According to Rhee et al dissatisfaction rate with spinal anesthesia was 3.7%.

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Conclusion

The study shows that there is high level of maternal satisfaction with spinal anesthesia but it can be further improved by proper counseling, improving the skill of anesthetist. The side effects can be decreased by taking proper precautions.

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