

Introduction

Dehydration prior to elective surgery is detrimental, and initiatives such as ‘Sip-til-Send’ aim to prevent this by allowing small drinks of clear fluid prior to surgery. We introduced a ‘Sip-til-Send’ policy for women undergoing elective caesarean birth, with informal feedback suggesting that women may prefer fluids other than water. We wished to evaluate whether the introduction of water-based ice-lollies provided any additional benefit to water in this patient group.

Methods

We introduced a “Sip-til-Send” policy (water only) in July 2023 for women undergoing elective caesarean birth, and introduced ice-lollies on request in September 2023. We surveyed women in the two-week period prior to introduction of lollies, and again in the two-week period following this intervention. Data were collected for pre-operative fasting time, water and ice lolly consumption, and maternal satisfaction (0-5, where 0 = completely unsatisfied, 5 = completely satisfied).

Results

Twenty-eight surveys were collected from patients ‘before’ and 27 ‘after’ the introduction of ice-lollies. Median pre-hospital fluid fasting time was 112 minutes in the *before* group and 90 minutes *after* the introduction of ice lollies. Once in hospital, 23 (79%) of patients drank water in the *before* group compared with 27 (96%) 96% after the intervention. Nine (33%) women in the post-intervention group had at least one ice lolly. Maternal satisfaction with the refreshments provided was 4.0/5 in the before group and 4.8/5 in the after group. Mean satisfaction in those accepting lollies was 4.9/5. There were no adverse ice lolly related events.

Ice Ice Baby

‘Sook-til-Send’ before planned caesarean birth

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	Pre-intervention group	Post-intervention
Median Pre-hospital fluid fasting time	112 minutes	90 minutes
Accepted water pre-operatively	N=23 (79%)	N=27 (96%)
Maternal Satisfaction	4.0/5	4.8/5
Adverse events	0 (0%)	0 (0%)

Discussion

More work is required to encourage patients to drink clear fluids prior to, and following, arrival in hospital. Ice lollies were only consumed by a third of patients which we postulate might be due to women generally fasting in the morning, when ice lollies are not generally consumed, and a particularly poor run of weather during the role-out. Better publicity and warmer weather may see improved uptake. We are also planning a roll-out of the refreshments to labouring women. The intervention was associated with an increase in those drinking water in general, perhaps reflective of the positive ‘Sip til’ Send’ culture. An indication of high patient satisfaction and reporting of adverse symptoms needs further evaluation as processes become embedded.

References

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