

A retrospective review of non-obstetric surgical admissions of maternity patients to the critical care unit at a tertiary general hospital (2019-2023)

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Background:

Up to 2% of maternity patients may require non-obstetric surgery during their pregnancy. These authors wanted to review the non-obstetric surgical admissions in the maternity population to our 28-bedded critical care unit (HDU and ICU) at a 535-bedded tertiary general hospital.

Methods:

Ethical approval was obtained from the region's ethics committee. A list of obstetric admissions to the critical care unit was generated using a combination of the ICU clinical information system & handwritten HDU ledgers. Charts were individually analysed.

Main findings:



Surgical complaints account for **10%** [8/81] of all maternity cases admitted to the critical care unit



Four women were admitted to the ICU, four women were admitted to the HDU, (one was admitted to both, n=7 women in total)



The mean gestational age was 20.2 weeks with a **median gestational age of 16 weeks**



0.03% [7/20,147] of all maternity patients (2019-2023) required admission to the critical care unit for surgical reasons



The majority (**71.4%**) of these patients were **antepartum** [5/7]

Cause of admission	Number of cases
Unstable upper GI bleed	2
Small bowel obstruction	2
Necrotising fasciitis	1
Exacerbation of ulcerative colitis	1
Abdominal pain	1

Conclusion:

Non-obstetric surgical presentations in the maternity population are uncommon but may require admission to critical care. Familiarity with maternity patients in the non-obstetric surgical setting is thus essential in providing adequate care to this cohort.