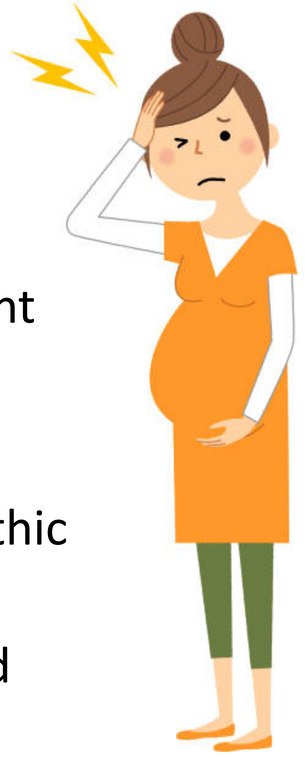
Prevalence & Management Guidelines for Parturients with Idiopathic Intracranial Hypertension at the University of Arkansas for Medical Sciences

Mikayla Troughton MD, Nadir El Sharawi MD

Introduction

- Most commonly manifests as a headache or visual changes
- Failure to diagnose & treat can lead to blindness in **10-20%** of patients
- Despite this knowledge, there are no standardized guidelines for intrapartum management



Methods

- **Retrospective chart review** of all women admitted for delivery with a diagnosis of Idiopathic Intracranial Hypertension between January 2015 to December 2020
- Collected age, BMI, anesthetic technique, urgency of delivery, symptom management and fetal outcomes, all data analyzed using Microsoft Excel

SOAP 2022
ANNUAL MEETING

Results

- The prevalence of Idiopathic Intracranial Hypertension (IIH) was **71/20,931 deliveries (0.34%)**
- Of these cases, **84.7%** received neuraxial anesthesia
- **40/71** patients underwent cesarean delivery (56.3%) and of these 40 patients, general anesthesia was used for 5 patients (5/40 = 12.5%)
- **70/71 (98.5%)** patients diagnosed with IIH were at least Class 1 Obesity
- Women with IIH are:
  - More likely to deliver via cesarean delivery (**56.3%** vs. institutional rate 41.1%)
  - More likely to receive general anesthesia (**12.5%** vs. institutional rate 4.5%)

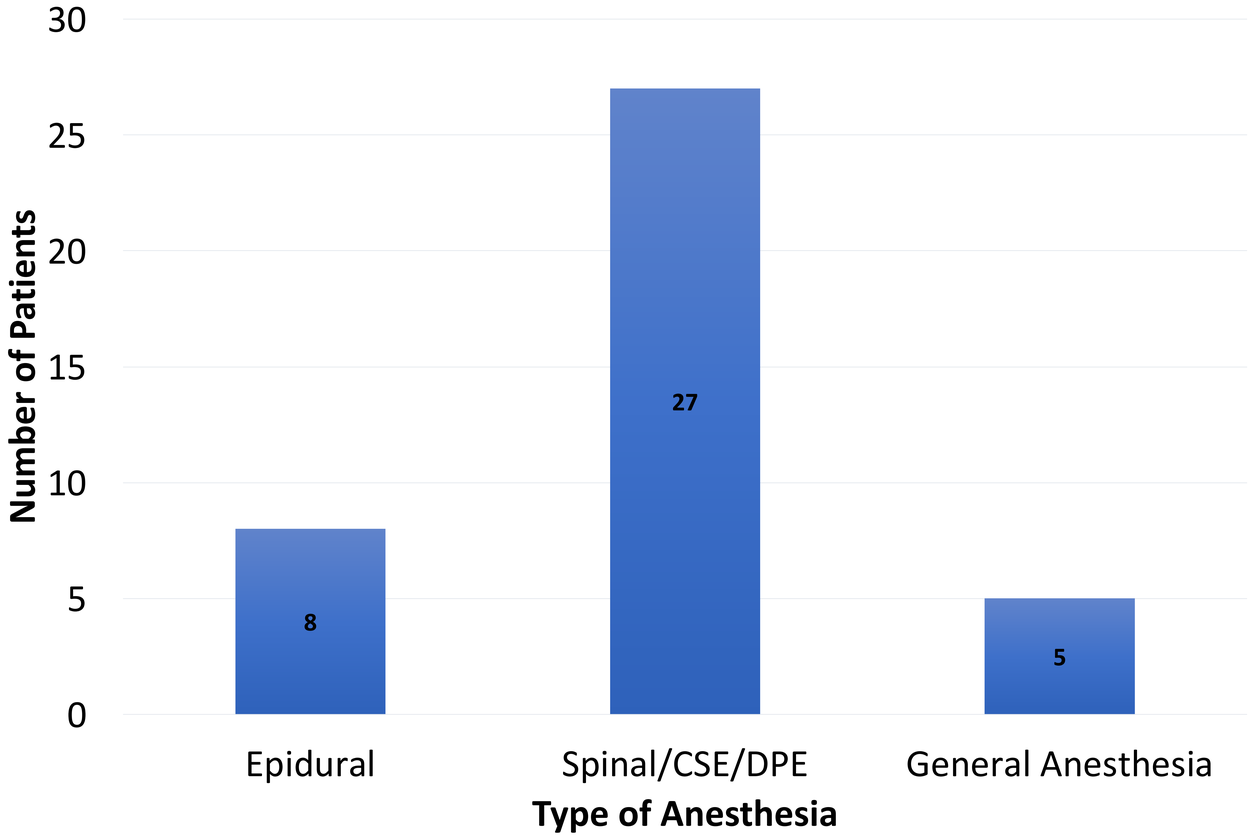
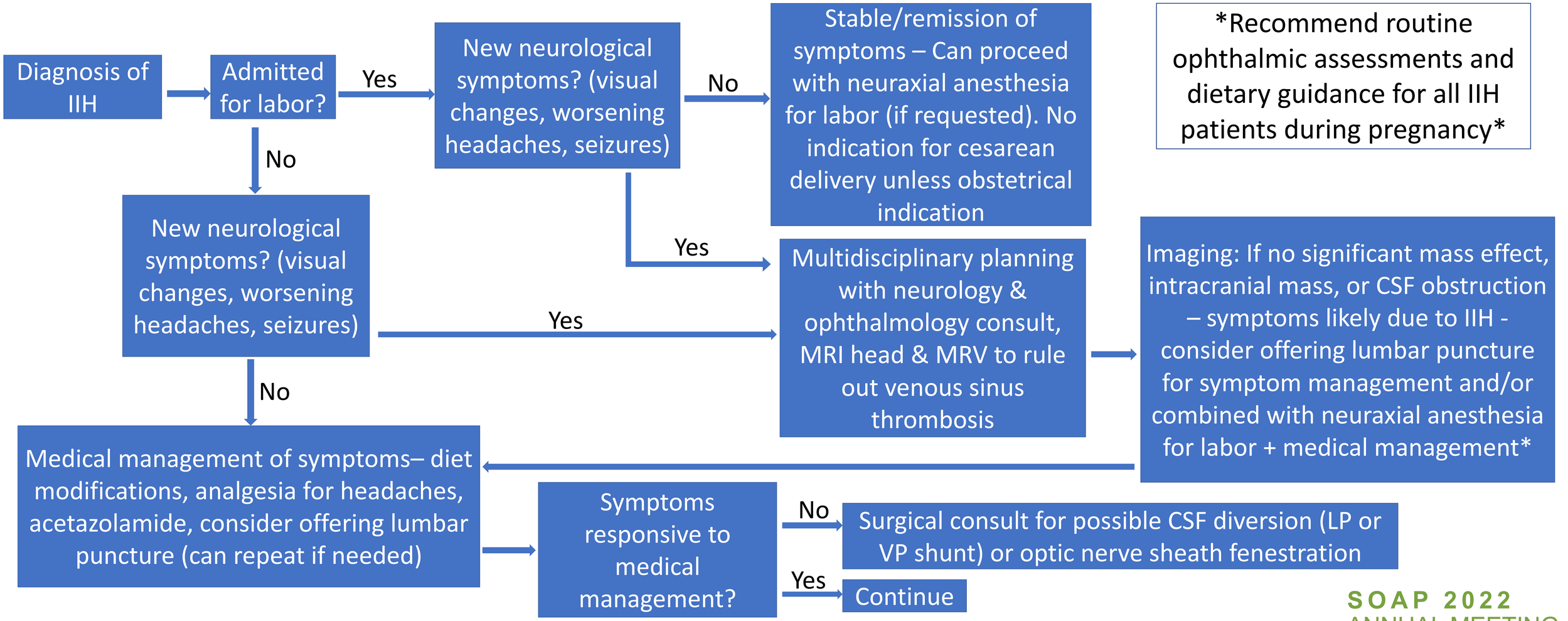


Figure 1. Modality of Anesthesia Provided for **Cesarean Delivery** (CSE – Combined Spinal Epidural, DPE – Dural Puncture Epidural)

Discussion & Management Algorithm