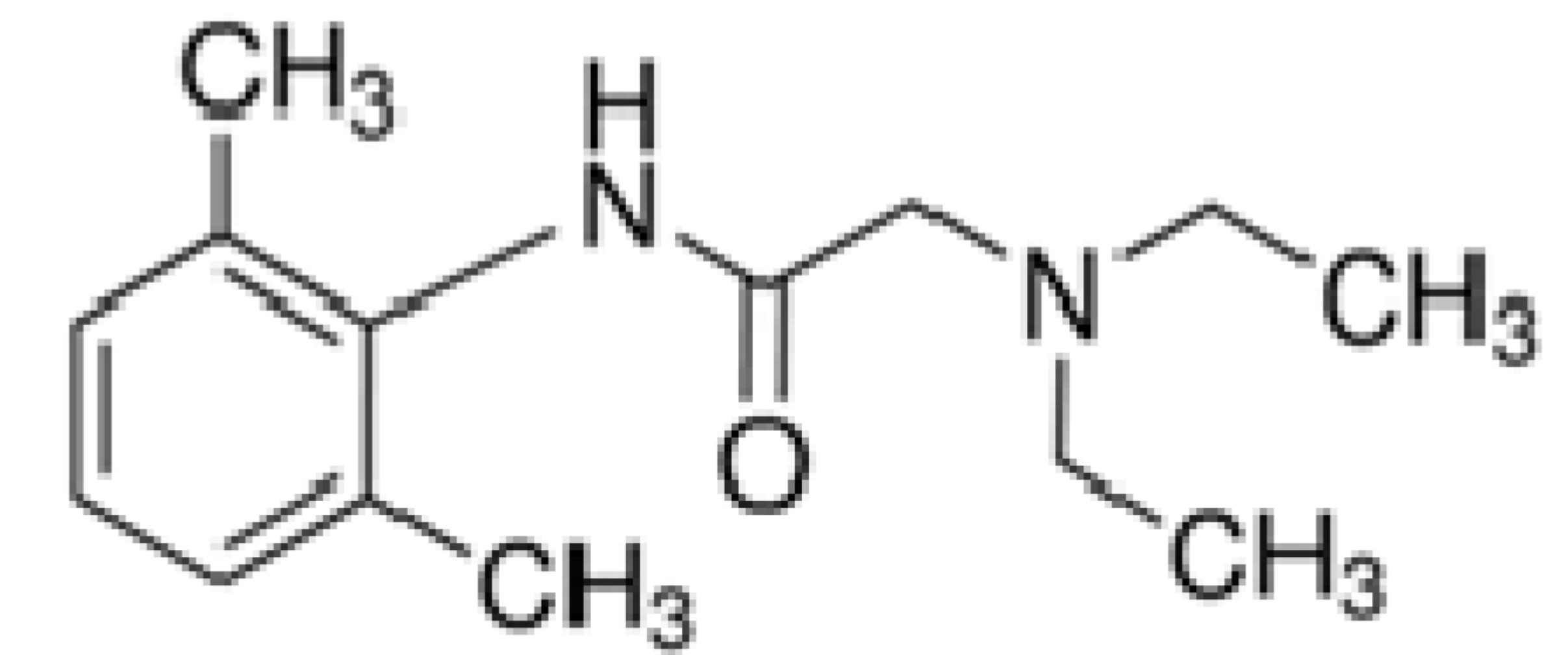


Successful Antepartum De-labelling of Local Anesthetic Allergy in a Parturient with a Self-Reported Allergy to Amide and Ester Local Anesthetics

Yamaguchi E, Ffrench O'Carroll R, Chau A, Preston R

Local Anesthetic Allergy

- Incidence < 1%
- Confirmation of true allergy typically done by skin testing
- **Should women undergo allergy skin testing during pregnancy?**



Case

- 30 yo G1P0 referred to anesthesia clinic at 32 wks
- Dental procedures as child: hypotension and dyspnea after local injection: **Lidocaine** (amide) and **Procaine** (ester)
- Strong desire for epidural labor analgesia

??? Allergic reaction?????



BC WOMEN'S
HOSPITAL+
HEALTH CENTRE
Provincial Health Services Authority

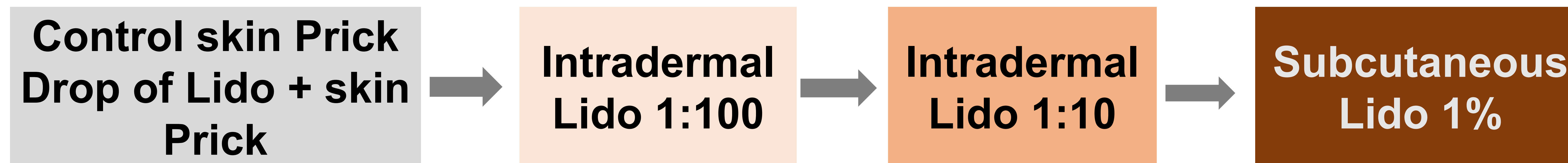


DEPARTMENT OF
ANESTHESIA

What happened

- Skin testing for lidocaine at 37 wks after informed consent
- Patient and fetus were monitored
- Equipment, team and OR ready in case of anaphylaxis and emergency cesarean delivery

Protocol

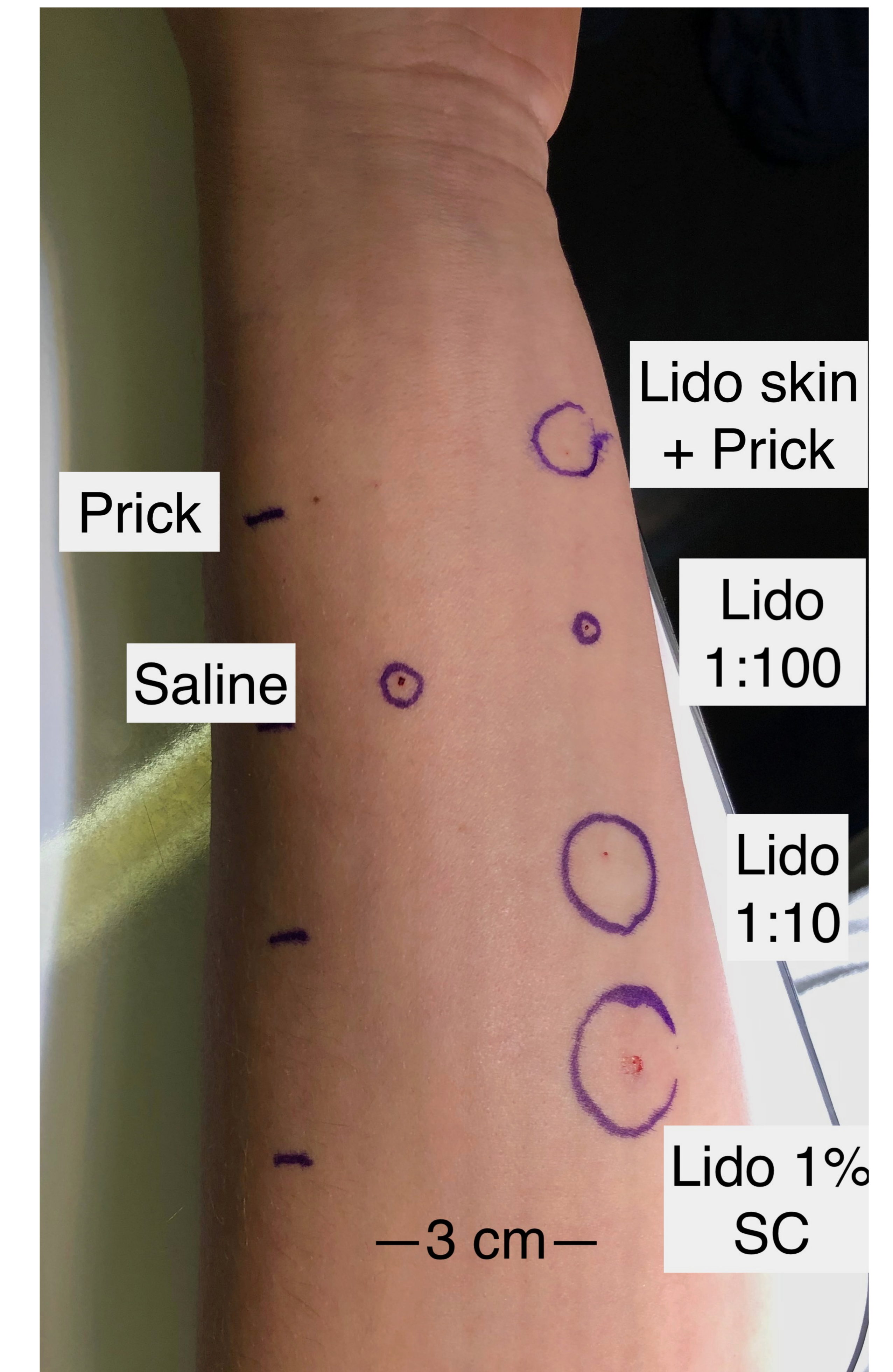


- **NEGATIVE** skin testing for Lidocaine (wheal < 3 mm)

Labor & Delivery

- Active labor at 38+5 wks
- Successful epidural labor analgesia

Left Forearm



Key Learning Points

- Allergy skin testing during pregnancy is **controversial**
- Risks/benefits should be **individualized** and discussed
- It should **NOT** be offered routinely. Consider in case of
 - Motivated patient
 - Motivated team
 - Sufficient resources to manage anaphylaxis and emergency delivery

References:

1. Canfield D, Anesth Prog. 1987
2. Bhole M, Br J Anaesth. 2012
3. Balestrieri P, A&A. 2003