SOAP Society for Obstetric Anesthesia and Perinatology

SOAP 2023 Annual MEETING

NEW ORLEANS | MAY 3-7

Provider BEWARE! Reactive Airway

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Case

- 47-year-old **G3P0110** at **37w4d** by IVF presented in labor
- PMH/PSH of cHTN, GERD; **D&C** and **myomectomy**
- Prior anesthetic record: "**reactive airways with bronchitis**"—not supported by patient
  - *Recommendation to avoid Hemabate intraoperatively*
- **Primary cesarean delivery** under **combined spinal-epidural** complicated by **small bowel injury due to adhesive disease**
  - Intraoperative General Surgery consult

JOHNS HOPKINS MEDICINE

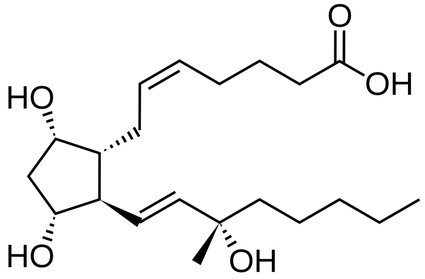
Case continued

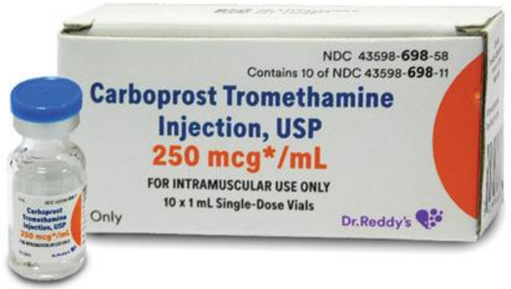
- **Placental separation proved difficult**
  - Ultimately removed with administration of oxytocin
- **Uterine atony** persisted despite receipt of methylergonovine and misoprostol
  - ***250 mcg intramuscular (IM) Hemabate***
    **per surgeon request*
- ~60 minutes later, increasing tachycardia during abdominal closure
- Patient cited burning chest discomfort; no ST segment changes on EKG; lungs clear
- Repeated attempts to obtain a NIBP reading unsuccessful (patient remained awake with stable EtCO2 tracing)
- Deteriorating mentation; uncooperative for arterial line placement
  - **Conversion to general anesthesia in the setting of acute delirium**
  - Intubated after rapid sequence induction with EtCO2 47 mmHg immediately after
  - Diffuse wheezing noted in bilateral lungs fields—resolved after receipt of albuterol
- Taken to the ICU: PPH of 2.3L with Bakri balloon placement, bowel resection and presumed bronchospasm
  - Extubated on POD 1
  - Discharged home on POD 5

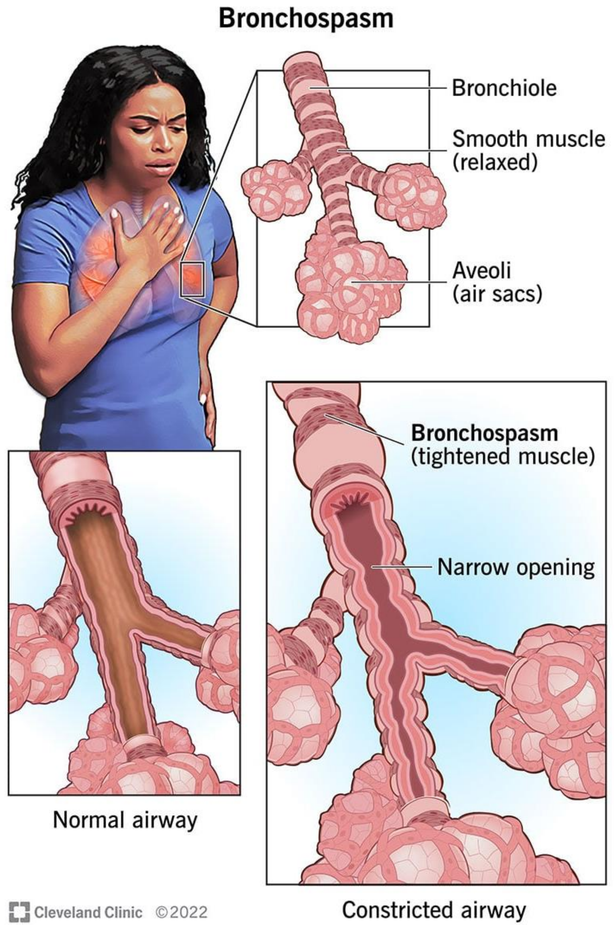
Discussion

- **Carboprost tromethamine (Hemabate)**: synthetic analog of prostaglandin $F_{2\alpha}$
  - Indications: second-line uterotonic, pregnancy termination
  - Peak plasma concentrations within 15-60 minutes after IM injection
  - Known side-effects: pyrexia, flushing, nausea, vomiting, diarrhea, myalgia
  - ***Two case reports of bronchospasm occurring in a non-asthmatic patient and a neonate***

Always ask again—patient, surgeon, yourself.
Use only if you must.







References

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3. Mrvos R et al. (1999) *J Toxicol Clin Toxicol*. 37(7):865-7