Utilization of Multimodal Analgesia after Cesarean Delivery with Neuraxial Anesthesia Following Enhanced Recovery and ACOG updated Guidelines

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Background

- Postoperative pain following cesarean delivery (CD) is concerning
- Opioid sparing multimodal analgesia (osMMA) is underused
  - 6.1% (2008-2018)

Aims

1. Describe utilization of osMMA after CD
2. Evaluate factors associated with receipt of osMMA

Hypothesis

The utilization of osMMA increased after 2018

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Study Design and Methods

Retrospective Cohort Study in Premier Database

Deliveries from 2018 - 2023

Descriptive statistics + mixed-effects logistic regression

Covariates: Patient/hospital traits, payor, location, comorbidities

Results

- 1.6 million CDs

- Neuraxial morphine → 81.2%
- NSAIDS → 97.2%
- Plain acetaminophen → 69.8%
- Acetaminophen/opioid → 44.7%

- osMMA = 36.21%

- ↓ osMMA:
  - Black, public insurance
  - Medical comorbidities
  - Non-teaching, rural
  - < 500 beds
  - Southern region
  - ICC = 0.54

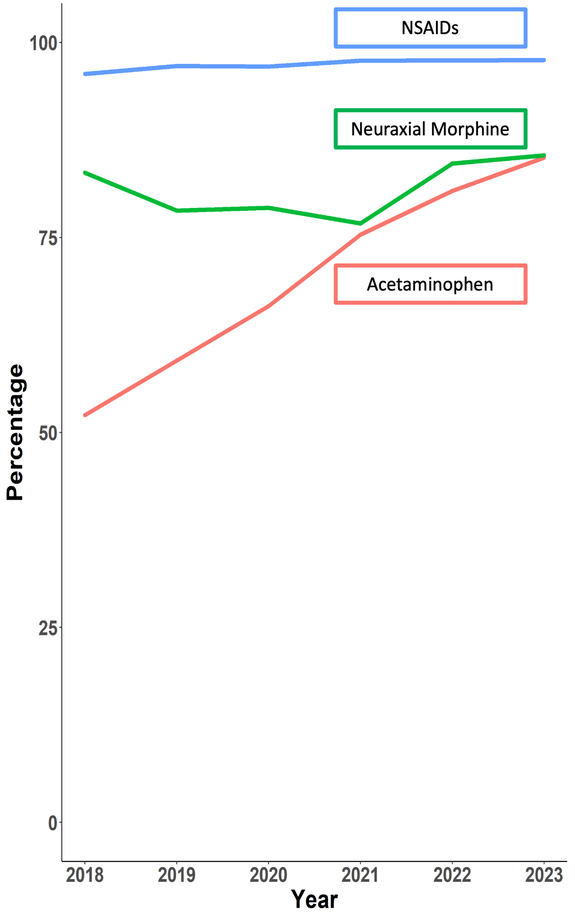

Figure 1a. Use of osMMA components over time

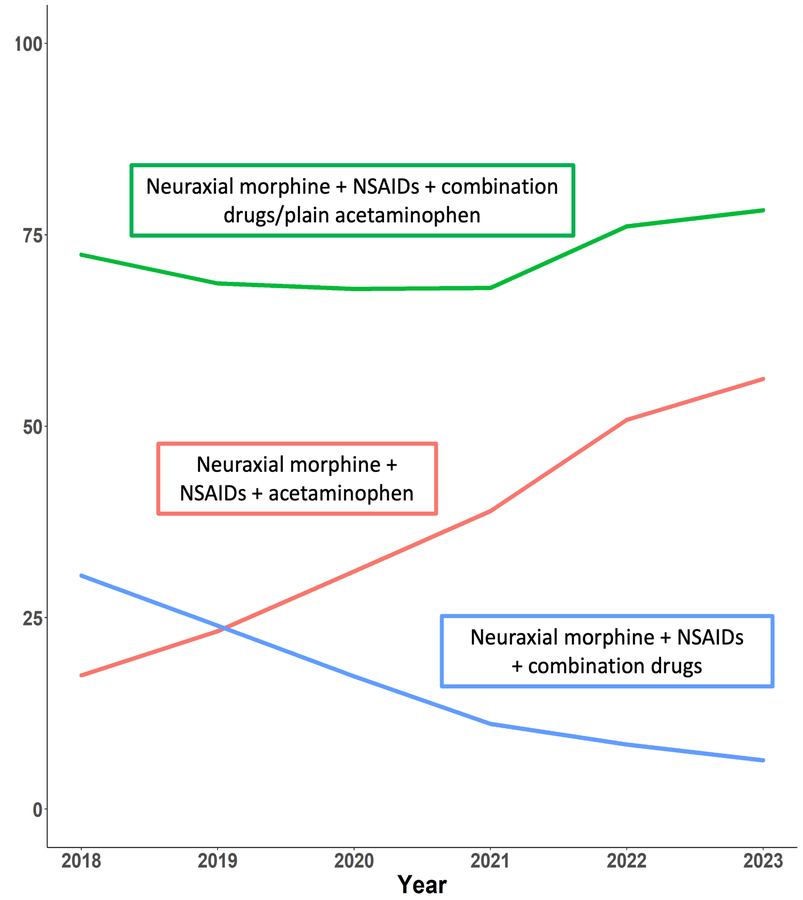

Figure 1b. Use of multimodal analgesia regimens over time

Conclusion & Discussion

osMMA use substantially increased

Combination drugs are still frequently used

Disparities and hospital-level variation persist