

A Survey Study to Assess Patient Opinions of Anxiolysis Prior to Neuraxial Anesthesia for Cesarean Delivery

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Background

- Anxiolytics historically withheld until delivery
- Current data show no significant impact on neonatal outcomes
- Patient anxiety often not assessed
- Potential gap in patient-centered care

Objective

- Assess patient reported anxiety related to neuraxial anesthesia and cesarean delivery
- Determine what proportion of patient would have desired anxiolytic medication if offered

Hypothesis

- Many patients experience significant anxiety and would opt for anxiolysis if given the choice

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Methods

- IRB approved
- Inclusion Criteria
 - Postpartum patients
 - 12-48 hrs after CD w/ neuraxial in OR
- Electronic REDCap Survey (iPad)
- Exclusion Criteria
 - <18 years old
 - Non-English speaking
 - Received anxiolytic meds
- 100 patients enrolled

Results

- 941 screened > 180 approached > 100 enrolled

Median Anxiety Scores (0-10)

- Cesarean delivery: 6 [3-8]
- Neuraxial: 5 [3-7]

Anxiolysis offering

- 50%: not offered
- 31%: unsure if offered

Patient Preferences

- 45% would decline if memory impaired
- 69% would decline if neonatal risk increased
- 17% would have wanted anxiolysis

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Key findings

- Patients experience meaningful anxiety during CD w/ neuraxial anesthesia
- A subset would prefer anxiolysis
- Many patients unsure if anxiolysis was even offered

Clinical Implications

- Gap in shared decision making
- Patient autonomy necessitates discussion

Take-Home Message

- Not all patients want anxiolysis, but some do
- Routine discussion of risks and benefits

Future Directions

- Evaluate impact of anxiolysis on:
 - Maternal experience
 - Neonatal outcomes
- Develop standardized counseling approaches