

# The influence of needle diameter on puncture failures in relation to cesarean section and vaginal delivery; a prospective, randomized study.

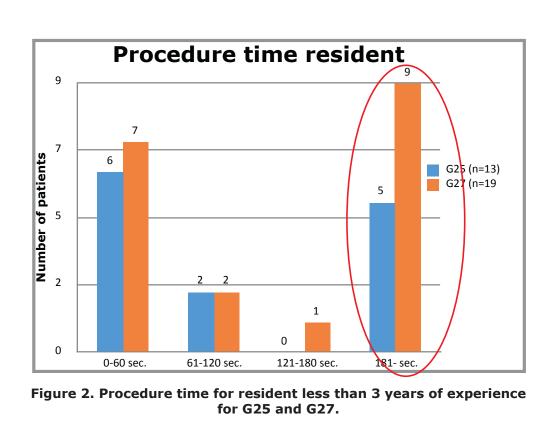
Nina Skei<sup>1</sup>, Grethe Heitmann<sup>2</sup>, Leiv Arne Rosseland<sup>3,4</sup>

<sup>1</sup>Levanger Hospital, Norway, <sup>2</sup>Østfold Hospital Trust, Norway, <sup>3</sup>Division of Emergencies and Critical Care, Oslo University Hospital, Norway, <sup>4</sup>University of Oslo, Institute of Clinical Medicine, Norway.

## Background:

- Comparsion of G25 PP and G27 PP in obstetric anesthesia related to technical difficulties and level of experience
- The aims were:
  - to see if total puncture time, number of failed needle attempts and change of needle were different
  - to evaluate if there are group differences in Post Dural Puncture Headache (PDPH)

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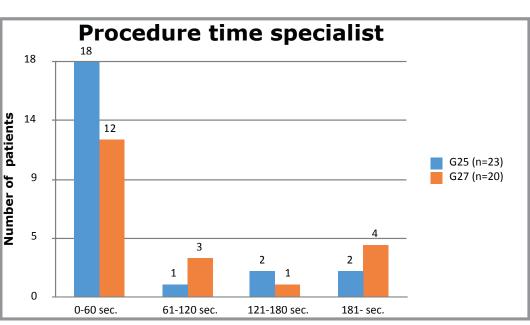


Figure 3. Procedure time for specialist in seconds for G25 and G27 PP needle.

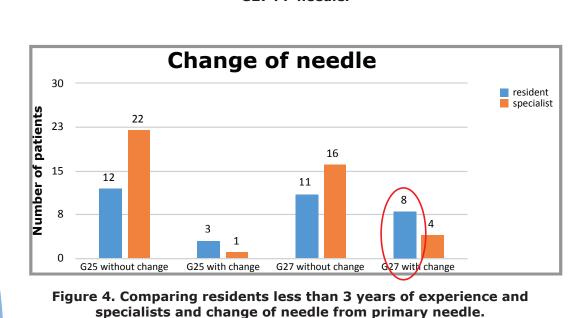


Figure 5. This diagram explains how often residents less than 3 years of experience and specialist need 2 or more attempts

using G25 and G27 PP needle.

# Preliminary Results: N=88

G25 PP group: 42, G27 PP group: 46

- Two excluded due to failed dural puncture
- Procedure time longer than 180 seconds occur more frequently among residents with less than 3 years of experience
- Residents using G27 as the primary needles required more attempts and changed needles more frequent than residents using G25 or specialists

### Conclusion:

Residents with less than 3 years of experience had a prolonged procedure time and more technical difficulties using G27 as the primary needle compared to G25 needle.

Among specialists no difference between the needles used was found.

# Method:

- Parturients undergoing caesarean section or vaginal delivery using spinal anesthesia are randomized into two groups, G25 and G27
- The anaesthesiologists register their level of experience, patient BMI, procedure time, number of attempts and any change of needle
- A questionnaire regarding any symptoms of PDPH follows each patient
- Exclusion criteria: labour epidural or attempt of this, chronic headache, not informed consent and contraindication to regional anesthesia