

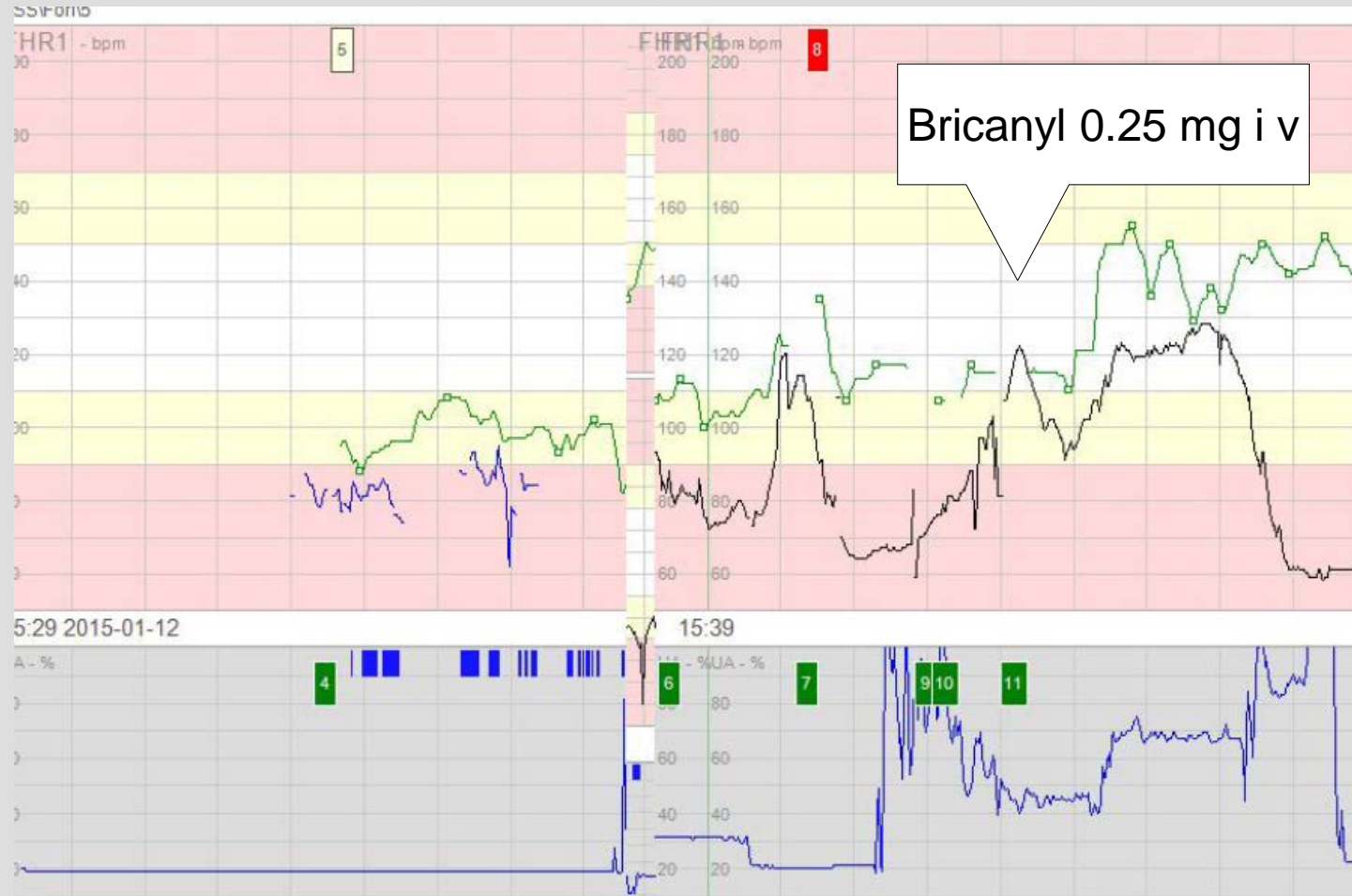


Akut kejsarsnitt

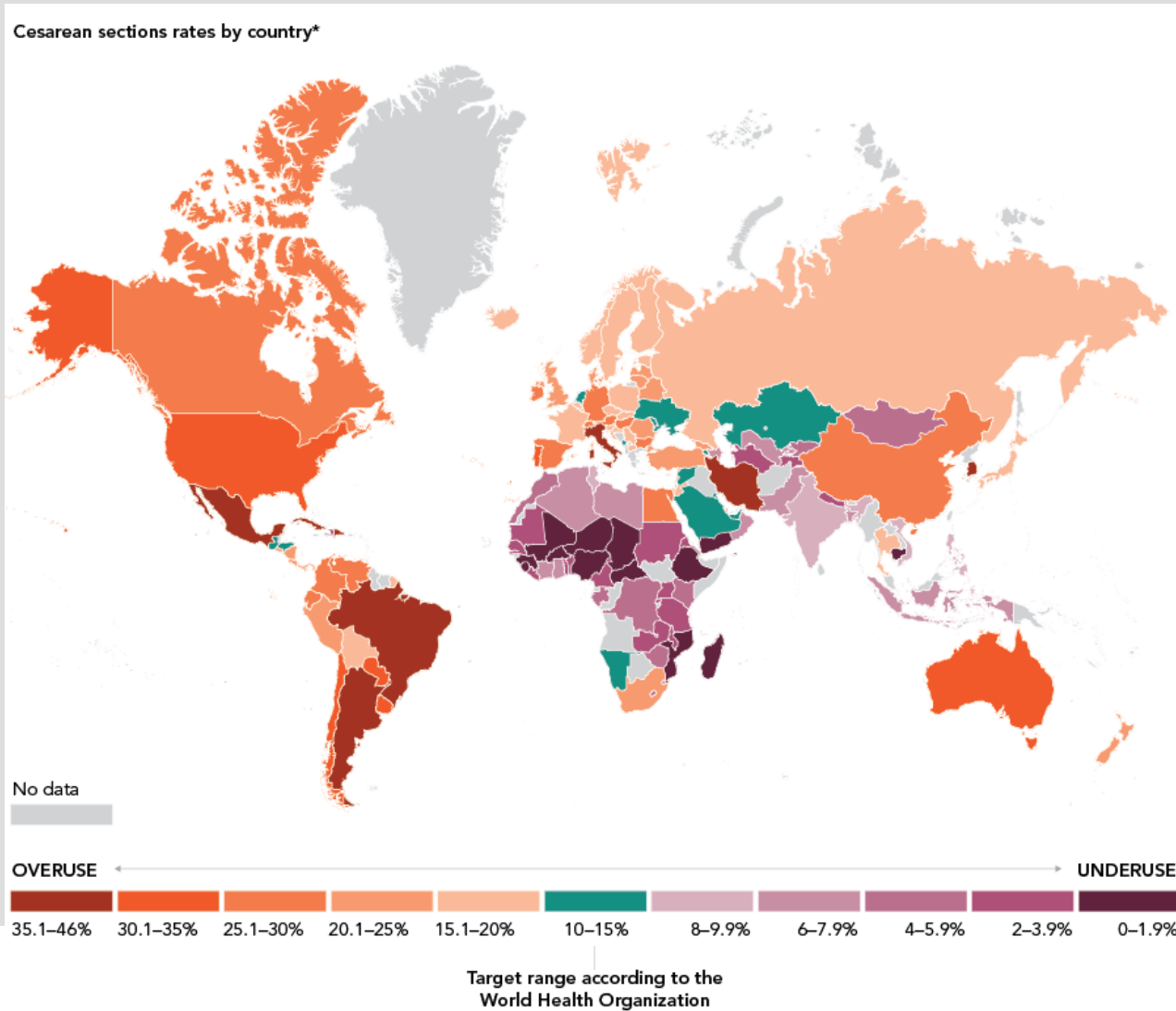
Sissel Saltvedt

Söndag eftermiddag

1-föderska
40 veckor
Vattenavgång
Värkar
Öppen 3 cm

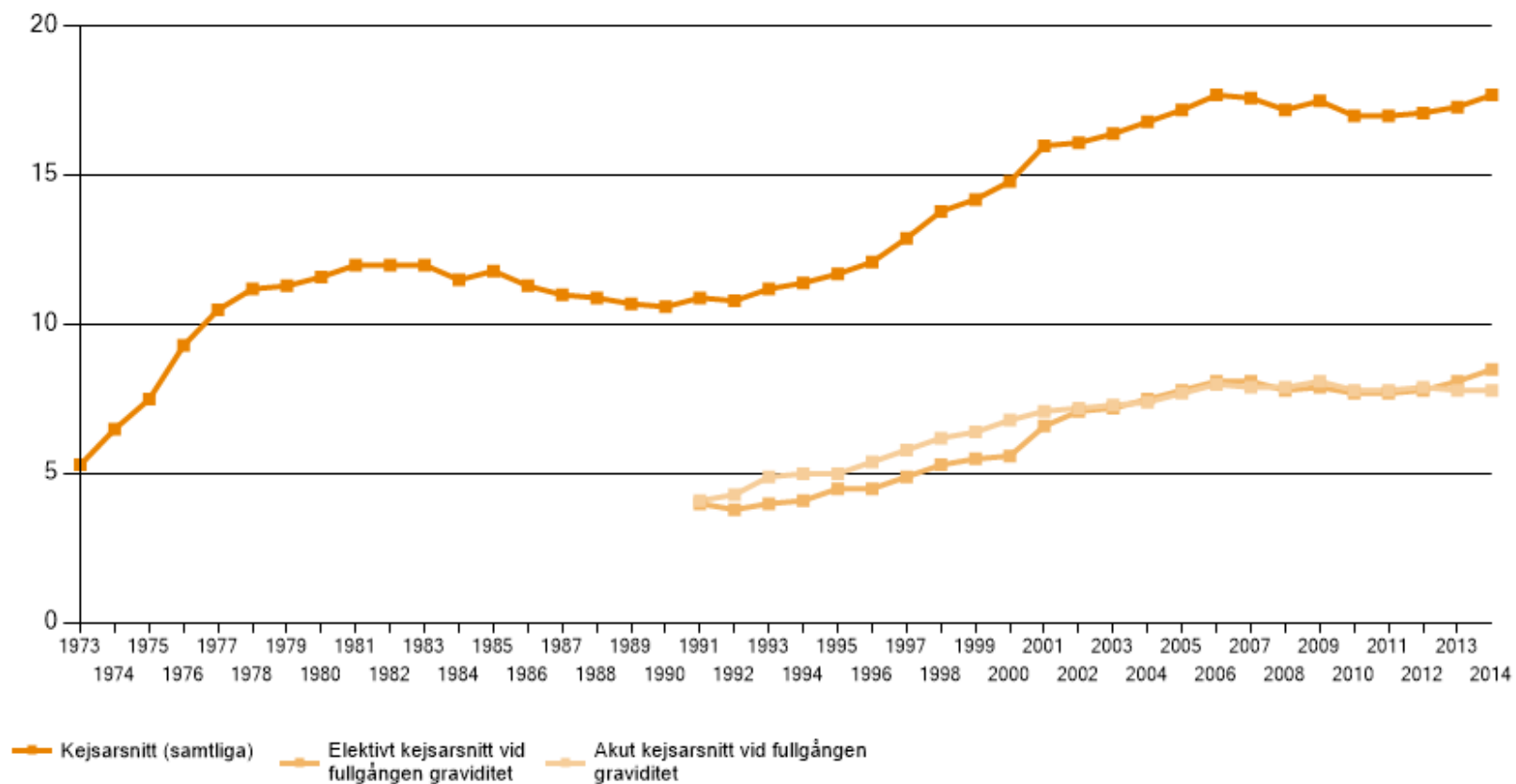


Kejsarsnittsepidemi



Kejsarsnitt i Sverige 1973-2014

Förlossningsstatistik, Procent, Riket, Ålder: Alla åldrar, Totalt



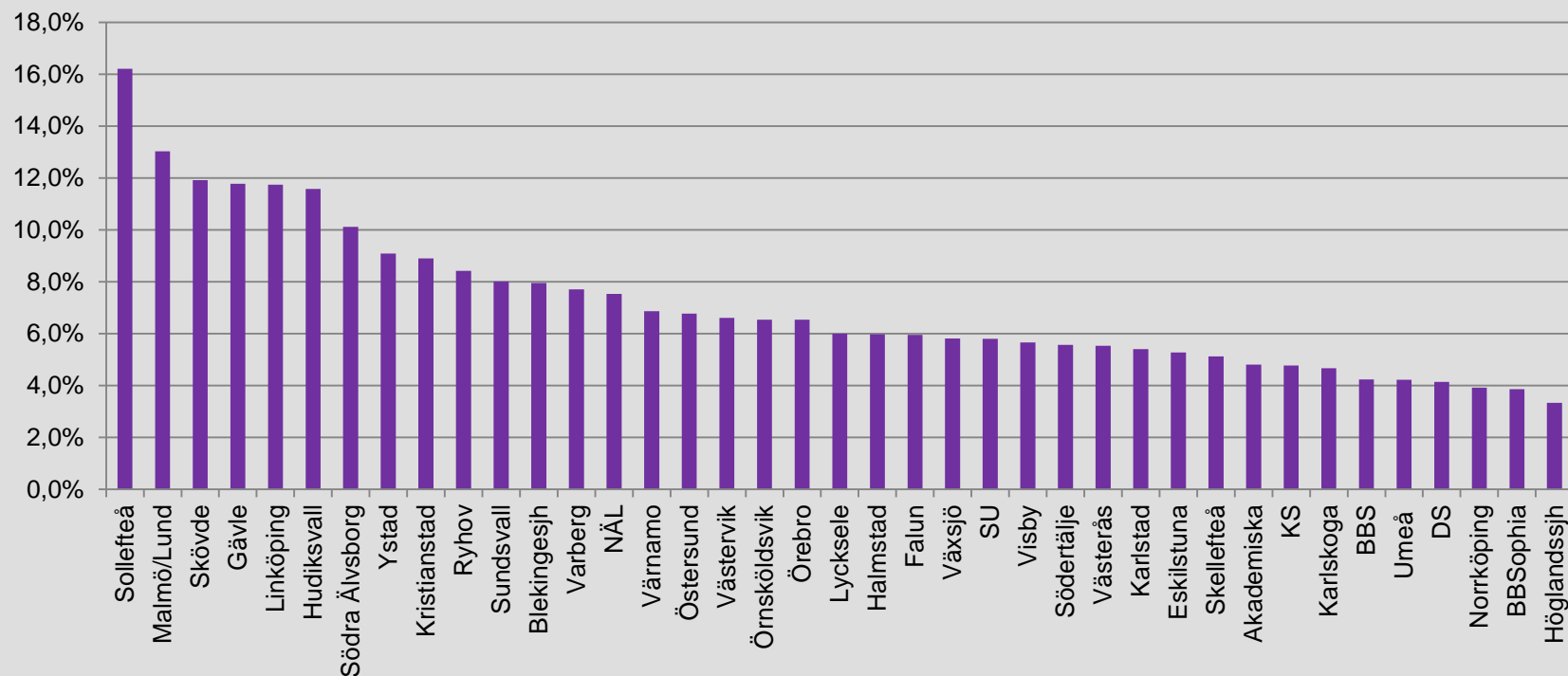
Ökad snittfrekvens

- Högre ålder, BMI, sjd
- Lägre tröskel för att tillgripa snitt
- Snitt "föder" snitt
- Säten snittas
- Flerbörd
- "Psykosocial" indikation

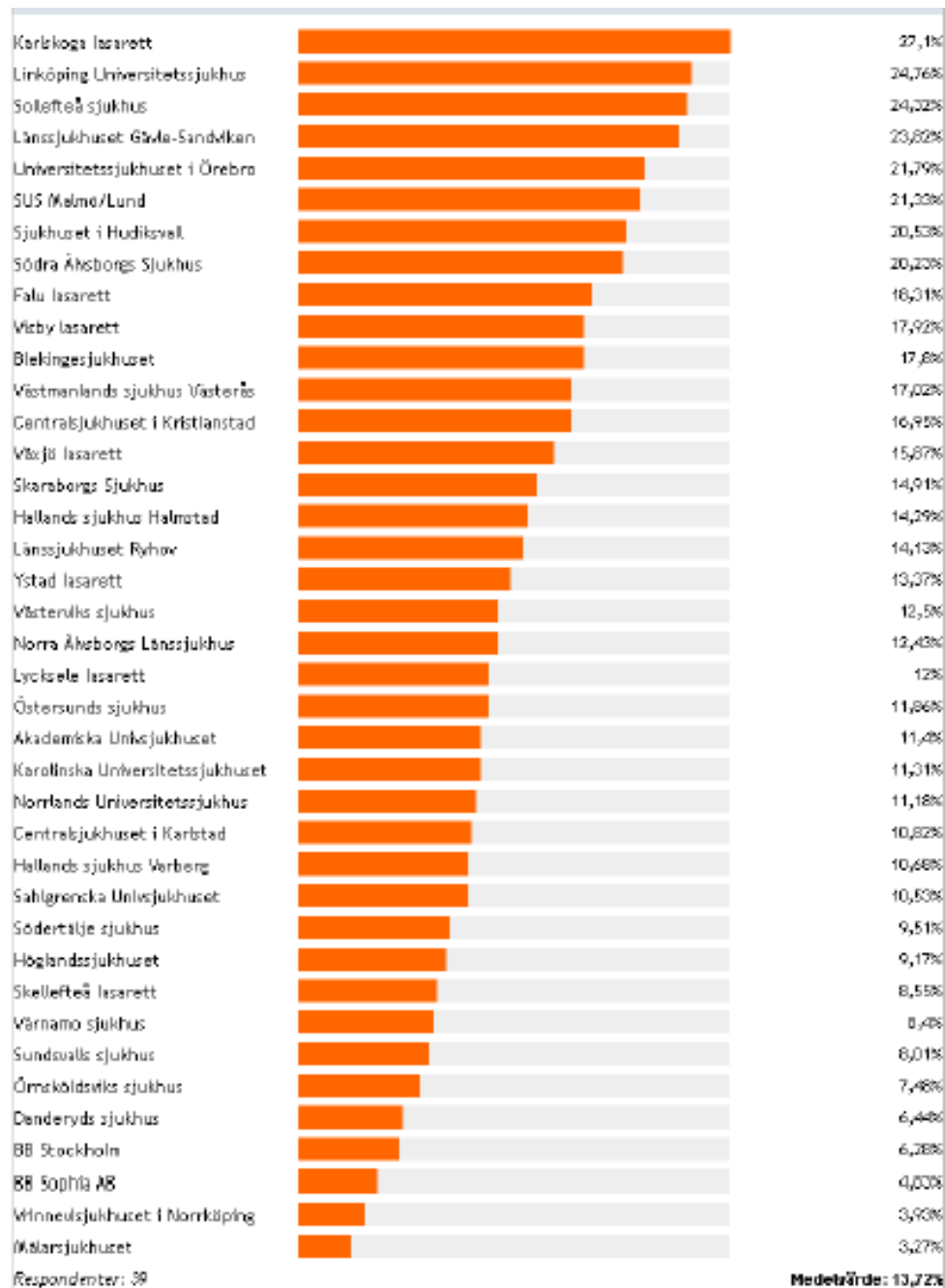


Andel omedelbara sectio av alla sectio

%urakuta



Andel sectio i GA



Respondenter: 39


Medeltårde: 13,72%

Definitioner akut snitt

- Varierar!
- Akut snitt (urgent, non elective)
 - < 8 timmar (ICD 10)
 - < 24 timmar
 - Icke planerat..
- Omedelbart - urakut (emergency)
 - < 15 min (SFAI)
 - < 30 min (ACOG, RCOG)

Lucas classification of degree of urgency of CS

Figure 1. A classification relating the degree of urgency to the presence or absence of maternal or fetal compromise

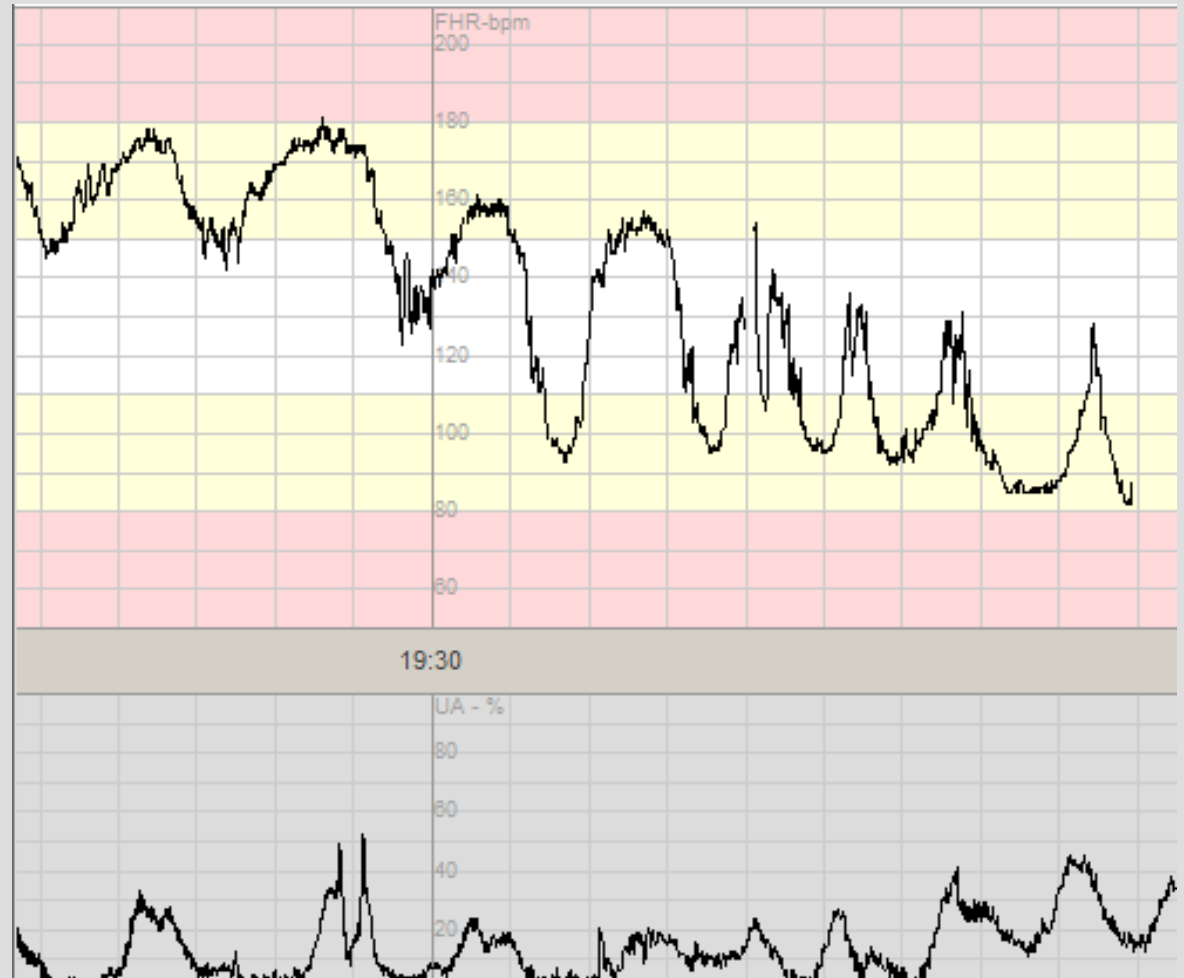
	Urgency	Definition	Category
	Maternal or fetal compromise	Immediate threat to life of woman or fetus	1
	No maternal or fetal compromise	No immediate threat to life of woman or fetus	2
Requires early delivery		3	
	At a time to suit the woman and maternity services	4	

Orsaker till fetal hypoxi

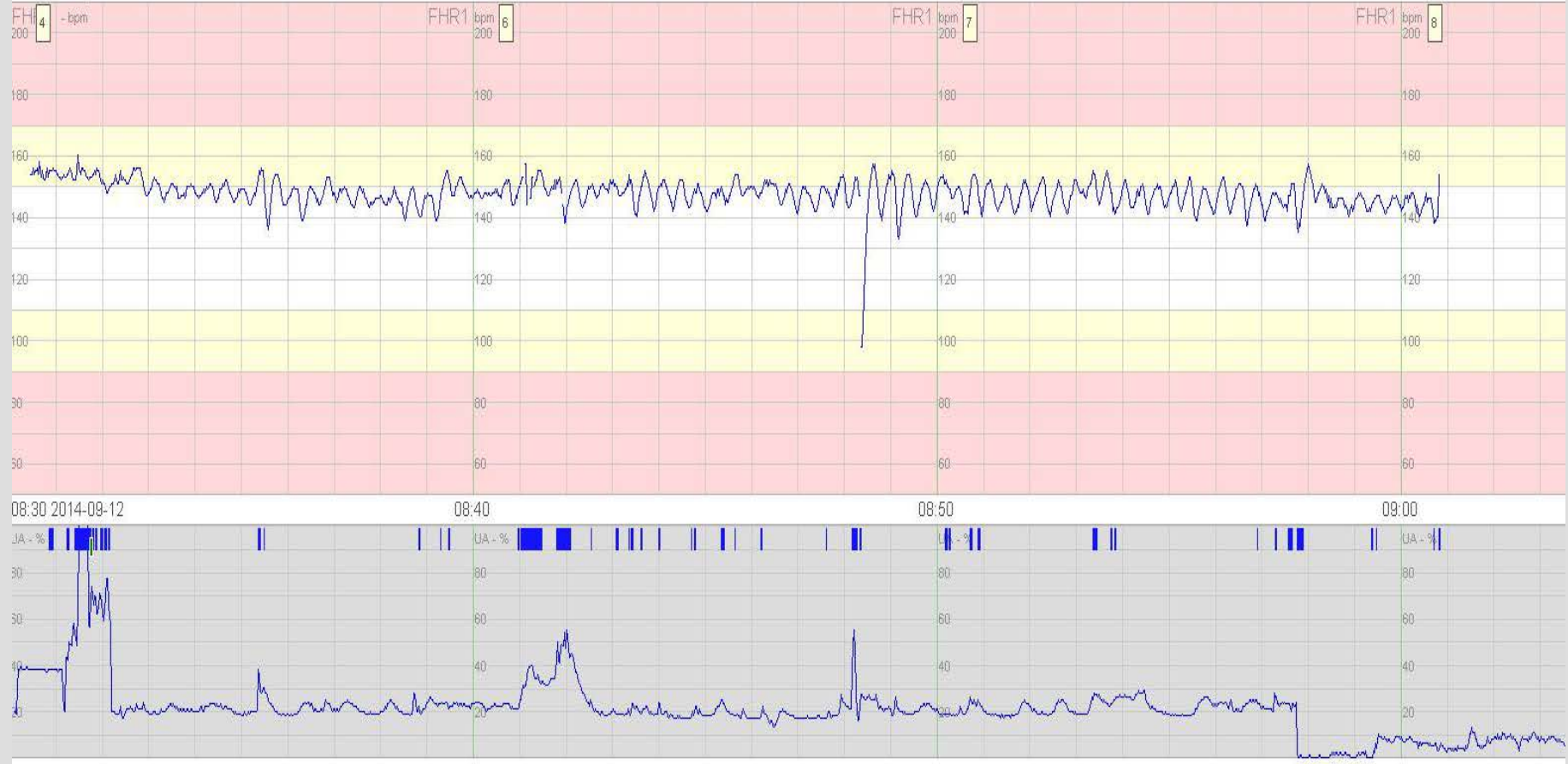
Akut	Navelsträngs prolaps Placentaavlossning Uterusruptur
Kronisk	Placentainsufficiens - minskade glykogennivåer hos fostret - redistribution av blodflödet - tillväxthämning - minskade fosterrörelser
Intermittent	Vid varje värk

Hur bråttom?

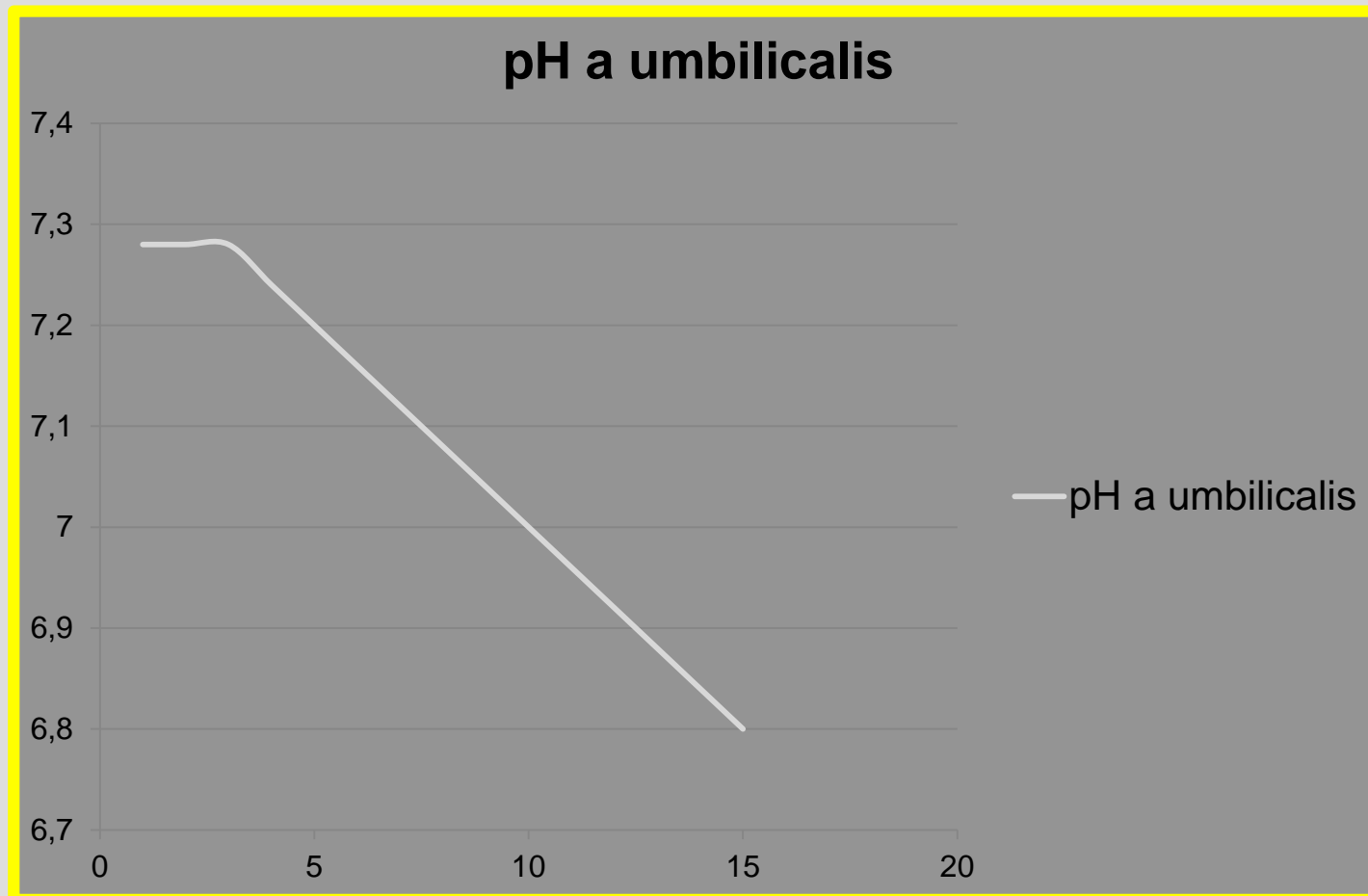
- gestationslängd
- fostertillväxt
- fostervattnet
- CTG
- oxytocin



KSSI/Anteiltag 14



Totalt upphört flöde i navelsträngen



Intrauterine resuscitation

- Vä sidoläge
- Stäng av oxytocin
- Tokolys (ex Bricanyl 0.25 mg iv)
- (Syrgas)
- (Ringeracetat)



Värksvaghet

Bristningar
Blöddingar
Blåsskada
Infektion
Förlängd vårdtid
Negativ upplevelse

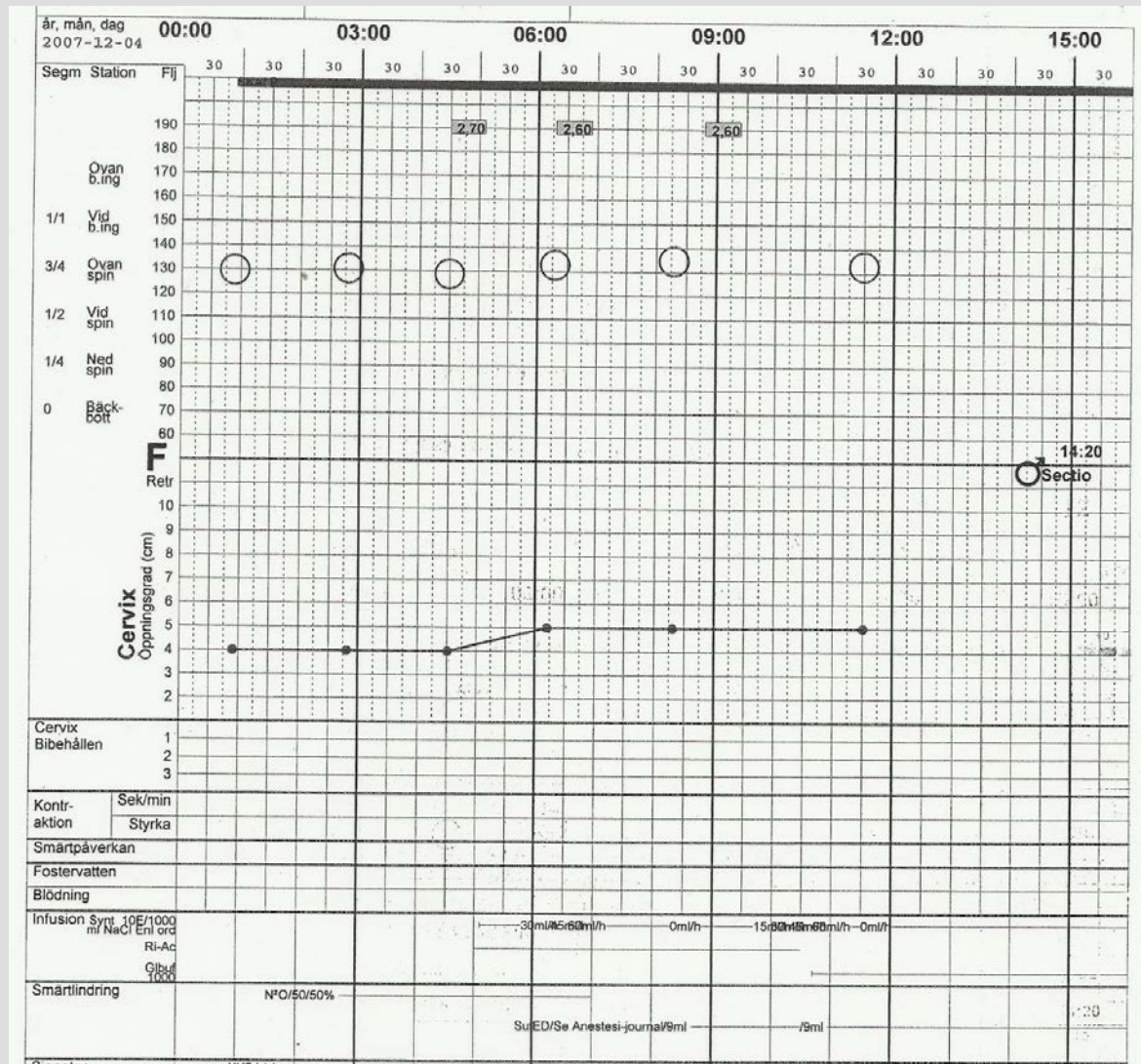


Table 3. Intrapartum Data: Procedures, Assessment of Care, and Experiences of Pain and Control During Labor (Data Collected 2 Months after the Birth)

Data Collected at 2 Months	Birth Experience			95% CI	p
	Negative (n/¼ 173) No. (%)	Positive or Mixed Feelings (n/¼ 2368) No. (%)	RR for Negative Experience		
Epidural (CS without labor excluded) ^a	90 (12.0)	660 (88.0)	3.1	2.1–4.2	<0.001
Induction ^b	37 (13.0)	247 (87.0)	2.4	1.7–3.4	<0.001
Augmentation of labor ^a	126 (10.9)	1033 (89.1)	2.9	2.1–4.0	<0.001
Long labor (>18 hr) (elective cesarean excluded) ^c	48 (17.8)	222 (82.2)	3.6	2.6–5.0	<0.001
Mode of delivery					
Normal vaginal	81 (4.1)	1868 (95.9)	1.0	Ref.	
Instrumental vaginal	30 (16.5)	152 (83.5)	4.0	2.7–5.9	<0.001
Elective cesarean	6 (4.5)	126 (95.5)	1.1	0.5–2.4	0.83
Emergency cesarean	45 (23.7)	145 (76.3)	5.7	4.1–7.9	<0.001
Met midwife before ^d	36 (2.4)	1484 (97.6)	0.3	0.2–0.5	<0.001
Characteristics of intrapartum care midwife (agree completely) ^e					
Attentive to my needs	84 (4.5)	1792 (95.5)	0.2	0.2–0.4	<0.001
Attentive to my partner's needs	67 (4.7)	1355 (95.3)	0.5	0.4–0.7	<0.001
Encouraging	98 (4.8)	1929 (95.2)	0.3	0.2–0.4	<0.001
Competent in psychological matters	81 (4.9)	1559 (95.1)	0.4	0.3–0.6	<0.001
Competent in medical matters	87 (5.5)	1489 (94.5)	0.6	0.5–0.8	<0.01
Competent in technical matters	100 (5.7)	1644 (94.3)	0.6	0.4–0.9	<0.01
Satisfied with aspects of intrapartum care ^f					
Information about progress of labor	71 (3.9)	1748 (96.1)	0.3	0.2–0.4	<0.001
Involvement in decision-making	54 (3.1)	1704 (96.9)	0.2	0.1–0.3	<0.001
Support by midwife	102 (4.8)	2023 (95.2)	0.2	0.2–0.3	<0.001
Support by doctor	75 (9.4)	720 (90.6)	0.7	0.5–0.9	<0.01
Labor pain "worst imaginable" ^g	85 (12.9)	576 (87.1)	3.2	2.4–4.4	<0.001
In control: short moment or not at all ^h	136 (15.9)	718 (84.1)	9.6	6.3–14.4	<0.001

Separation mor-barn vid snitt

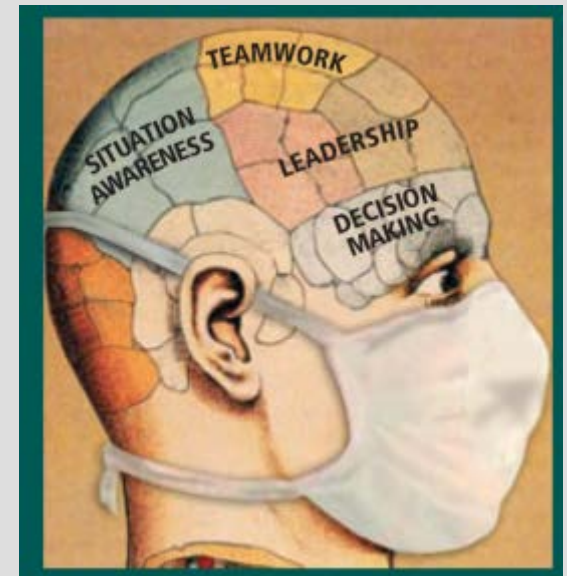
In essence, mothers felt that, whatever the circumstances, they wanted to be close to their babies. It was the mother's experience that the organisation, staff or other circumstances prolonged the separation from her baby.





BOST

- Brådskande Obstetriska Situationer Tränas
 - Bristande samarbete och dålig kommunikation bidrar till avvikelser i 50 % av akuta situationer inom obstetrike
(Joint Commission US, 2006)
 - Teoretiskt seminarium 1 tim
 - Simuleringsövning med återkoppling 2 tim
 - Icke tekniska färdigheter tränas
- ## KOMMUNIKATION



Timeout - Omedelbart Section

Anestesiläkaren utför under preoxygenering - 20 sekunder!

1. Indikation?

Finns alternativ till att söva?
Finns tid till att tvätta?
Finns KAD - ska det sättas?

2. Frisk patient?

Pre-eklampsi? Glöm då inte Rapifen!
Allergi?
Saturationsklämma på - bedöm hjärtfrekvens!

3. Luftväg?

Bedömd?
Optimerat läge?
Videolaryngoskop?
Sug & ledare redo?

4. Är alla klara?

Någon på sal som inte är klar? Speak up!



WILEY

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The natural caesarean: a woman-centred technique

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Abstract

Go to:

Although much effort has gone into promoting early skin-to-skin contact and parental involvement at vaginal birth, caesarean birth remains entrenched in surgical and resuscitative rituals, which delay parental contact, impair maternal satisfaction and reduce breastfeeding. We describe a 'natural' approach that mimics the situation at vaginal birth by allowing (i) the parents to watch the birth of their child as active participants (ii) slow delivery with physiological autoresuscitation and (iii) the baby to be transferred directly onto the mother's chest for early skin-to-skin. Studies are required into methods of reforming

Maternal assisted CS



TACK!