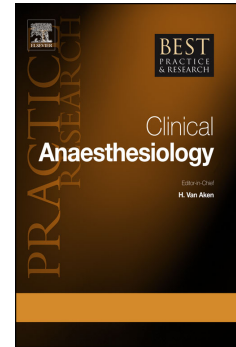


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Preeclampsia in 2017: Obstetric and Anaesthesia Management

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# Preeclampsia in 2017: Obstetric and Anaesthesia Management

*Best Practice & Research Clinical Anaesthesiology – Obstetric Anaesthesia*

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Anaesthesia; preeclampsia; perioperative medicine; biomarkers; ultrasound.

Abstract

In many centres, Anaesthesia now incorporates Perioperative Medicine. Preeclampsia is a perioperative medical challenge requiring a multidisciplinary team. New definitions stress the rapid progression of the disease and highlight the importance of early detection. Anaesthesiologists should understand the pathophysiology, and develop the ultrasound skills required to assist in the assessment of disease severity. This facilitates the choice of anaesthesia method, and perioperative management in complicated cases. Regional anaesthesia remains central, but there are important developments in the practice of general anaesthesia, if indicated. Appropriate haemodynamic monitoring should be established. Anaesthesiologists should also lead the resuscitation team in the management of cardio-respiratory failure and coagulopathy.

Preeclampsia and perioperative medicine in 2017

Hypertensive disorders of pregnancy are second only to acute obstetric haemorrhage as a direct cause of maternal death.(1) Preeclampsia is the most prevalent high-risk condition. Pragmatic, evidence-based best practices for perioperative care are essential. However, in this heterogeneous disease process which often presents on an urgent basis, it is challenging to perform large randomised trials. Therefore, recommendations are frequently based on expert opinion and small studies. Despite ongoing extensive clinical and laboratory research, many concepts as basic as the disease pathophysiology remain unresolved. New research is elucidating the cellular origin and cardiovascular interactions, but many implications in clinical practice still need to be explored.

Numerous authors describe the central role played by anaesthesiologists in integrating the rapidly-developing field of Perioperative Medicine into current best practices for holistic patient care.(2) Several Departments of Anaesthesiology have changed the name of the speciality to Anaesthesia and Perioperative Medicine.(3, 4) In particular, this applies to the management of preeclampsia, where obstetric anaesthesiologists are central to understanding pathophysiology, assessing disease severity, and providing anaesthesia, cardiovascular monitoring, and critical care.(5) The efforts of anaesthesiologists as part of a multidisciplinary perioperative care team – incorporating obstetricians, physicians, cardiologists, midwives, and critical care specialists – can make significant

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