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Post-dural puncture headache in a DGH: a decade after MBRRACE-UK

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Introduction

The 2009-2012 MBRRACE-UK report identified 2 post dural puncture headache (PDPH) case fatalities that lacked appropriate follow-up.[1] We audited our PDPH incidence and management, and compared this the standards set by the Obstetric Anaesthetists' Association (OAA), national data as well as our six previous audits.[2,3]

Methods

Between the 1 April 2019 and 31 March 2020, management of women with PDPH was recorded prospectively on a proforma. Procedural count was obtained via our electronic database (CSC maternity).

Results

A total of 1587 procedures were performed. These consisted of 904 (57%) spinals, 596 (38%) epidurals and 87 (5%) combined spinal-epidurals (CSE). The PDPH rate post spinal and post accidental dural puncture (ADP) was well below the OAA benchmark of 1% and 90%, respectively. Data illustrated in table 1.

Discussion

For 7 years we have had good standards for the management of patients with ADP and PDPH. The gradual rise in post-spinal PDPH reflects the new national trend and was reassuringly under the OAA benchmark.[2] We suspect this rise may be due to the introduction of NRFit needles. Though our ADP rate was above the 1% national threshold, our use of intrathecal catheters was consistently excellent to help achieve immediate analgesia. We optimally performed our EBPs 48 h after the PDPH onset for maximum efficacy and we report no complications.

Table 1 (Data in percentage)

	OAA	Annual Audit Cycle						
		1st	2nd	3rd	4th	5th	6th	7th
PDPH post spinal	1	0.2	0.29	0.4	0.46	0.3	0.4	0.55
PDPH post ADP	40-90	86	57	57	75	87.5	90	76.5
ADP	1	2	0.91	0.91	1.05	1.19	1.5	2.4
Intrathecal catheter	–	22	71	22	44	100	100	90.9
Patients requiring EBP	55-80	75	75	75	46	30	80	85
Written consent	100	100	100	100	100	100	100	100
EBP 24-48 h	–	–	–	–	17	33	11	0
EBP 48-72 h	–	–	–	–	50	67	33	54
EBP >72 h	–	–	–	–	33	0	56	46
Initial care instructions	–	–	–	–	100	100	100	100
Discharge instructions	100	–	–	–	100	100	68	82
GP letter uploaded	100	–	–	–	20	100	62	68

To improve our communication an updated checklist for ADP and PDPH has been formulated to include prompts for discharge instructions and a letter to the GP. We continue to encourage reflective practice, maximisation of every training opportunity and improve collaborative engagement to maintain hands on skills in the department.

References

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