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Society for Obstetric Anesthesia and Perinatology. Ft. Myers, Florida. May 12-16, 2004.

The 36th Annual Meeting of the Society for Obstetric Anesthesia and Perinatology (SOAP) was held May 12-16, 2004, at the Sanibel Harbor Resort, Ft. Myers, Florida. More than 400 members from 14 countries attended the meeting.

The program committee created a program in keeping with the society's mission: to provide anesthesiologists, obstetricians, and other physicians and members of related allied health specialties with knowledge that will reinforce past learning as well as disseminate new concepts, practices, and skills involving anesthesia and analgesia for pregnant women. During the 4 days, the meeting featured the Gertie Marx and Zuspan Award symposia, Best Paper Presentations, a series of pro/con debates, three "What's New" lectures, the Fred Hehre Lecture, the Distinguished Service Award presentation, "Breakfast with the Experts," and two panel discussions. In addition, participants were exposed to both oral and poster scientific presentations that had been chosen from a record number of 167 submitted abstracts.

On Wednesday, a preconference workshop focusing on High Risk Obstetric Care was held. The program was organized into six topics (Acute Respiratory Failure; Anaphylaxis and Cardiopulmonary Resuscitation in Parturients; Obstetric Hemorrhage and Coagulopathy in Labor and Delivery; Cardiac Disease in Pregnancy; Hypertension and Acute Renal Failure in Pregnancy; Cannot Intubate, Cannot Ventilate). In addition to the Course Directors, 24 faculty members from the United States, Canada, and the United Kingdom encouraged participants to take an active role in the evaluation of clinical problems, thus developing insights into the skills necessary in the diagnosis and resuscitation of high-risk obstetric patients. The day concluded with the SOAP Opening Reception.

The meeting opened on Thursday morning with the Gertie Marx Symposium, a symposium of the best abstracts submitted for consideration by resident or fellow anesthesiologists. A tribute was paid to Dr. Marx, who died earlier this year. Dr. Marx, a founding member of SOAP, influenced the development and safety of obstetric anesthesia for more than 40 yr. Results of the Gertie Marx Symposium are: first place, K. I. Stewart (University of Saskatchewan, Saskatoon, SK, Canada), "Comparison of Skin Disinfectants for Epidural Placement in Laboring Parturients"; second place, A. J. Fuller (Stanford University, Stanford, California, California), "Pain Tolerance in Pregnancy"; third place, S. K. Chau (St. James University Hospital, Leeds, United Kingdom), "Thrombocytopenia, Thromboelastography and Pregnancy, An In Vitro Model."

After the Gertie Marx symposium, the Distinguished Service Award was presented to recognize contributions to the Society and the specialty of obstetric anesthesia.

The first oral scientific presentations, including five works in progress, covering a variety of obstetric anesthesia topics, were presented during the Thursday morning session.

Before the lunch break, society members gathered for the first of two Pro/Con Debates, "Minimum Local Analgesic Concentration Studies: More Ups Than Downs." The minimum local analgesic concentration model was discussed in a pro/con fashion. An argument in favor of the minimum local analgesic concentration model is that the design is more efficient at estimating the ED₅₀ than more traditional dose-response designs. Conversely, arguments against the minimum local analgesic concentration model were presented stating that statistical efficiency of up-down studies is dependent on the choice of initial drug dose and intervals between dose levels. The debate concluded with statements that up-down studies do not replace traditional dose-

response studies and investigators should search for newer methods of evaluating efficacy of local anesthetics.

The afternoon meeting opened with the "What's New in Obstetrics?" lecture, entitled "Neonatal Encephalopathy and Fetal Monitoring." The lecture focused on the recent 2003 American College of Obstetricians and Gynecologists Taskforce on Neonatal Encephalopathy and Cerebral Palsy publication *Neonatal Encephalopathy and Cerebral Palsy: Defining the Pathogenesis and Pathophysiology*. The genesis of neonatal encephalopathy and cerebral palsy were discussed, and the criteria defining asphyxia during the intrapartum period (acute intrapartum hypoxic event) that are sufficient to cause cerebral palsy were reviewed:

Essential criteria (must meet all four):

1. metabolic acidosis in fetal umbilical cord arterial blood obtained at delivery (pH < 7 and base deficit ≥ 12 mm);
2. early onset of moderate to severe neonatal encephalopathy in infants born at 34 or more weeks' gestation;
3. cerebral palsy of the spastic quadriplegic or dyskinetic type;
4. exclusion of other identifiable etiologies such as trauma, coagulation disorders, infectious conditions, or genetic disorders.

The lecture concluded with the following statements:

1. The only types of cerebral palsy associated with intrapartum hypoxia are spastic and dyskinetic quadriplegias.
2. Other disorders should not be ascribed to intrapartum asphyxia unless there is evidence of spastic quadriplegia.
3. Severity should not be assigned before the age of 3-4 yr because some cases may improve.
4. Intrapartum hypoxia severe enough to cause cerebral palsy is accompanied by neonatal encephalopathy and seizures.

The importance of the criteria with respect to medical liability in that few cases of cerebral palsy can be ascribed to intrapartum events was also emphasized.

The Zuspan Award Symposium followed the "What's New in Obstetrics" lecture. Four participants and their abstracts were introduced. E. R. Norwitz (Brigham and Women's Hospital, Boston, Massachusetts) received the Zuspan Award for his work entitled "Identification and Characterization of Proteomic Biomarkers for Severe Preeclampsia in Cerebral Spinal Fluid."

The first meeting day concluded with the Annual Business Meeting. The meeting was called to order, followed by election of officers. The SOAP Education Award was presented to M. T. Sproviero (Northwestern University Feinberg School of Medicine, Chicago, Illinois) for "Development of a Unified Assessment Tool for Measuring Resident Performance during an Obstetric Anesthetic Scenario on a High Fidelity Human Patient Simulator."

Friday began with Oral Presentations #2. Four abstracts were presented. The "What's New in Neonatology" lecture followed and was entitled "Laser Umbilical Cord Surgery for Twin-Twin Transfusion." Since 1998, the technique has been used to demonstrate improved fetal outcomes in pregnancies complicated by twin-twin transfusion syndrome. Anesthetic considerations were also reviewed.

After a midmorning break, the first of three poster reviews was presented. A panel discussion entitled "Intravenous and Spinal Drugs for Labor Pain: Fact or Fiction" followed. The basic science surrounding the use of opioids for labor analgesia and novel spinal medications were discussed. Morphine, lipophilic opioids, and spinal drug combinations as well as the practical aspects of spinal opioid administration for labor analgesia were presented. During the discussion, the laboratory and clinical sciences surrounding the administration of parenteral opioids for labor analgesia were also reviewed. One novel aspect of this session was a discussion of the use of remifentanyl for obstetric analgesia.

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Saturday began with the traditional forum, "Breakfast with the Experts." SOAP faculty members held case discussions in a problem-based learning format. Members attended the Gerard W. Ostheimer Lecture, "What's New in Obstetric Anesthesia." After review of an extensive reference list of more than 800 articles, the 2003 literature relevant to obstetrics and obstetric anesthesia was presented. The second poster review followed.

The Fred Hehre Lecture was presented and was entitled "Maternal Mortality: What Have We Learned and How Do We Use It?" The root causes of maternal obstetric disasters and the potential changes in obstetric anesthesia practice that could impact these deaths were discussed.

After lunch, a Panel Discussion, "Practical SOAP Labor Analgesia: Alternatives to Conventional Epidural and Combined Spinal Epidural Analgesia in Labor" was presented. The history of continuous spinal labor analgesia was reviewed, and the recent multicenter trial evaluating the safety and efficacy of continuous spinal labor analgesia using 28-gauge spinal catheters was discussed. In addition, the history of parenteral labor analgesia was reviewed, and the ideal parenteral opioid labor analgesic was described. The use and selection criteria for "intrathecal" (single-injection spinals for labor analgesia) were also reviewed. Nonpharmacologic methods of labor analgesia were discussed, including hydrotherapy, hypnotherapy, cutaneous sterile water injections, doulas, acupuncture/acupressure, position changes, touch, massage, music, and aromatherapy.

The six Best Paper Presentations followed the Panel Discussion. Y. Ginosar (Hadassah Hebrew University School of Medicine, Jerusalem, Israel) received the Best Paper Award for work entitled "Antepartum

Chronic Epidural Therapy (ACET) Using Ropivacaine Improves Uteroplacental Blood Flow in Preeclampsia and Intrauterine Growth Retardation."

The Research Hour followed with a discussion of current and novel research themes in obstetric anesthesia. These themes were based on 2004 SOAP research abstracts and posters. The moderators presented critical appraisals of these works with the goal of understanding the potentials and limitations of the new approaches to obstetric anesthesia research. The annual SOAP Banquet concluded the day.

On Sunday, the Pro/Con Debate "Ephedrine, Rather Than Phenylephrine, Is the Vasopressor of Choice to Prevent and Manage Spinal-induced Hypotension" took place. One debater argued against the use of ephedrine, citing evidence that ephedrine use is associated with a greater incidence of fetal acidosis than phenylephrine. Conversely, an argument in favor of the use of ephedrine was presented, citing that the effects of ephedrine were transient and of minimal or no clinical significance, and that the long-term use of ephedrine in obstetrics is a testament to the safety of this drug.

The meeting concluded with Poster Review #3. For the first time at a SOAP meeting, an entire poster session was dedicated to case reports and was entitled "You Did What? The Best Case Reports of the Year."

In the closing ceremonies, members were invited to mark their calendars for the 37th Annual Meeting of SOAP in Palm Desert, California, May 4-7, 2005.

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