A-1069 Room I, 10/16/2000 9:00 AM - 11:00 AM (PS) Walking Epidural Analgesia: The effect of Ambulation on Labor Duration and Maternal Outcome Manuel C. Vallejo, M.D.; Gordon L. Mandell, M.D.; Francisco Jaime, M.D.; Sandra Makishima, M.D.; Sivam Ramanatban, M.D., Anesthesiology, Magee-Womens Hospital, Pittsburgb, PA, United States. Ambulation with Ropivacaine walking epidural analgesia does not necessarily shorten labor duration or improve maternal outcome.

A-1070 Room I, 10/16/2000 9:00 AM - 11:00 AM (PS) Dose/Response of Intrathecal Fentanyl Added to Bupivacaine for Labor Analgesia C.A. Wong, MD; B.M. Scavone, MD; J.N. Ganchiff, MPH; T.P. Strauss-Hoder, MS, Dept. Anesth., Northwestern Univ., Chicago, IL,. Intrathecal fentanyl 0, 5, 10, 15, 20 and 25µg was added to bupivacaine 2.5mg for labor analgesia. Fentanyl 0, 5 and 10µg did not provide satisfactory analgesia.

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A-1071 Room I, 10/17/2000 9:00 AM - 11:00 AM (PS) Do Rapidly Administered Intermittent Epidural Boluses Provide Better Labor Analgesia? Kodali Bbavani-Sbankar, MD; Stanislov Malov, MD; Ronald Hurley, MD; Sanjay Datta, MD, Anesthesiology, Brigham and Women's Hospital, Boston, MA, United States. Rapidly administered epidural intermittent boluses result in better spread of local anesthetic and better labor analgesia than the continuous infusion.

A-1072 Room I, 10/17/2000 9:00 AM - 11:00 AM (PS) Does Labor and Delivery Induce Airway Changes? Kodali Bhavani-Shankar, MD; Linda S. Bulich, MD; Ronny Kafiluddi, MD; Michael Kral, MD; Sanjay Datta, MD, Anesthesiology, Brigham and Women' Hospital, Boston, MA, United States. Airway changes induced by labor and delivery were evaluated in healthy primigravdae. The airway classification changed in 23(38%) parturients following labor and delivery.

A-1073 Room I, 10/17/2000 9:00 AM - 11:00 AM (PS) Bispectral EEG Index during General Anesthesia for Caesarean Section Boris Bryssine, MD; Bernard Allaouchiche, MD; Dominique Chassard, MD, Anesthesia, Hotel Dieu, Lyon, Rhone, France. General anesthesia for caesarean section is frequently complicated by intraoperative awareness and recall, and there is no data on BIS index changes during this procedure.

A-1074 Room I, 10/17/2000 9:00 AM - 11:00 AM (PS) Combined Spinal-Epidural Anesthesia (CSE) for C/S: Does Epidural Saline Administration Improve Success Rate? Shaul Cohen, MD; Barbora Hronkova, MD; Elizabeth Burley, BS; Sajida Ahmad, MD; Phyllis Pollak, BS, Anesthesiology, UMDNJ, New Brunswick, NJ, United States. We determined that administration of epidural saline before insertion of the catheter for CSE for C/S improved success rate.

A-1075 Room I, 10/17/2000 9:00 AM - 11:00 AM (PS) Maternal Fetal Complications and Medical Malpractice Kirstin M. Erickson, MD; Barry A. Harrison, MD; Matthew S. Kumar, MD; Gurinder Vasdev, MD, Anesthesiology, Mayo Clinic, Rochester, MN, United States. In complex and emotional maternal fetal complications with poor outcomes, lawyers compared to obstetric anesthesiologist are not biased in determining medical malpractice. A-1076 Room I, 10/17/2000 9:00 AM - 11:00 AM (PS) Medical Management of the Seizing Pregnant Patient. Maternal-Fetal Conflicts Sheila F. Gardner, MA(Hons), MD; Donald H. Penning, MD,MS; Amy P. Murtha, MD; Barbara M. Hendrix, ARM; John V. Booth, MBChB, Anesthesiology, Duke University Medical Center, Durham, NC, United States. Anesthesiologists and obstetricians were surveyed about seizures and fetal distress. More OBs chose maternal stabilization over immediate C/S.

A-1077 Room I, 10/17/2000 9:00 AM - 11:00 AM (PS) In-Vitro Fertilization Induced Changes In Coagulation Using Thromboelastography Miriam J.P. Harnett, FFARCSI; Lawrence Tsen, MD; Sanjay Datta, MD; Kodali Bhavani-Shankar, MD, Anesthesiology, Brigham and Women's Hospital, Boston, MA, United States. Short term high estrogen levels did not have a clinically significant effect either on platelet activation or on clot formation and lysis.

A-1078 Room I, 10/17/2000 9:00 AM - 11:00 AM (PS) Total Spinal Anesthesia Requiring Tracheal Intubation in Parturients: The Association with Failed Epidural Anesthesia Scott E. Helsley, MD,PbD; Elizabeth Bell, MD; Terrance W. Breen, MD; Donald Penning, MD, Anesthesiology, Duke University Medical Center, Durbam, NC, United States. In Cesarean sections high spinals requiring intubation occurred more often after labor epidural analgesia.

A-1079 Room I, 10/17/2000 9:00 AM - 11:00 AM (PS) Intrathecal Ropivacaine or Bupivacaine with Fentanyl for Labor Analgesia Damien Hugbes, MB; David Hill, MD; Howard Fee, MD PhD, Anaesthesia, Ulster Hospital & Queen's University, Belfast, United Kingdom. In this study an intrathecal injection of 2.5mg ropivacaine with fentanyl 0.025mg in a CSE technique provided similar analgesia but less motor block than bupivacaine 2.5mg with fentanyl.

A-1080 Room I, 10/17/2000 9:00 AM - 11:00 AM (PS) A Polymorphism of the Endothelial Nitric Oxide Synthase Gene Is Associated with Pre-Eclampsia Ruth Landau, MD; Kevin Lee; Alastair J.J. Wood, MD; Hong G. Xie, MD; Richard M. Smiley, MD, PhD, Anesthesiology, Columbia University, New York, NY, United States. Pre-eclampsia is associated with the Asp298Asp genotype of endothelial nitric oxide synthase (eNOS).

A-1081 Room I, 10/17/2000 9:00 AM - 11:00 AM (PS) Does Intrathecal Fentanyl Affect Intrathecal Morphine Analgesia after Cesarean Delivery Sung-Hee R. Lee, MD; Norman L. Herman, MD; Barbara L. Leigbton, MD; Jill Fong, MD; Farida Gadalla, MD, Anesthesiology, Weill Medical College of Cornell University, New York, NY, United States. IT fentanyl used in spinal anesthesia for cesarean delivery decreases postop analgesia of IT morphine.

A-1082 Room I, 10/17/2000 9:00 AM - 11:00 AM (PS) CSE for Labor Analgesia: Timing of Infusion and Instrumental Vaginal Delivery Rates Alison J. Macarthur, BMSC, MD; Fiona Mattatall, BMSc, MSc, Department of Anesthesia, University of Calgary, Calgary, AB, Canada. Cohort study examining when to initiate the epidural component of the CSE technique for labor and comparing the instrumental vaginal delivery rates of CSE vs epidural technique.