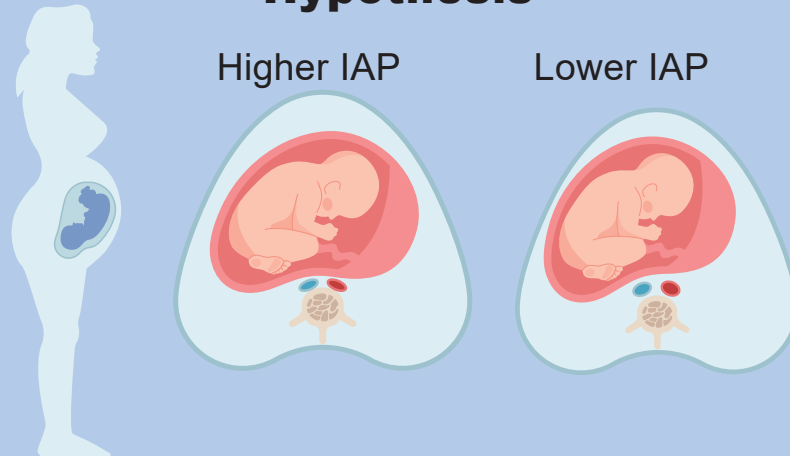


Intra-Abdominal Pressure: A Predictor of Hypotension in Cesarean Delivery

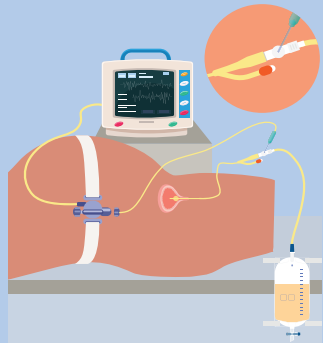
Hypothesis



Method

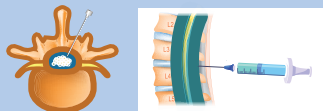
IAP measurement

IAP measurement via a urinary catheter connected to a pressure monitoring device



Anesthesia procedure

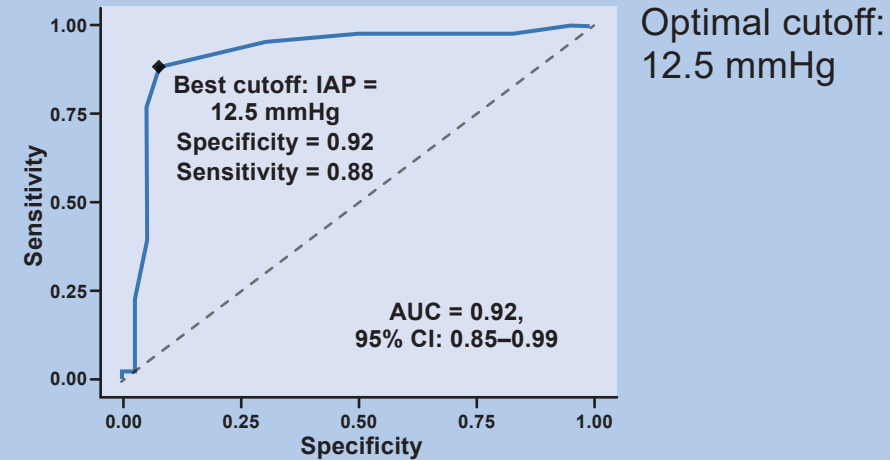
Spinal anesthesia



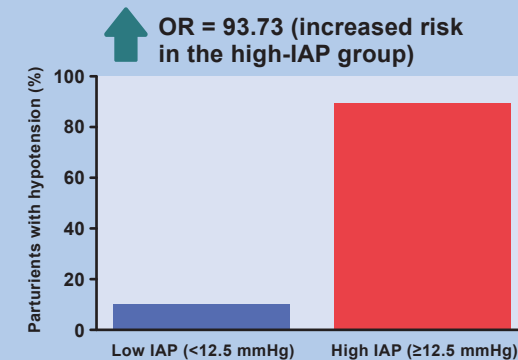
IAP: Intra-abdominal pressure

Data analysis and results

ROC curve



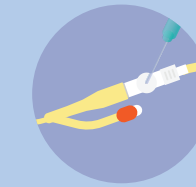
Comparison of hypotension incidence in low-IAP and high-IAP groups (11.9% vs. 92.7%)



AUC: Area under curve; CI: Confidence interval; OR: Odds ratio

Clinical significance and intervention

Prediction model



IAP measurement → Risk stratification → Personalized anesthesia plan

Maternal outcomes



High IAP increased nausea incidence (17.1% vs. 0%, $P = 0.005$)



High IAP increased phenylephrine requirement (100 [50–100] μ g) vs. 0 [0–0] μ g, $P < 0.001$)

IAP ≥ 12.5 mmHg independently predicts post-spinal anesthesia hypotension risk during cesarean delivery