Obstetric Anaesthesia 2020: Birmingham

The International Journal of Obstetric Anesthesia (IJOA) is pleased to publish the best 110 abstracts that were submitted for presentation at the annual scientific meeting (ASM) of the Obstetric Anaesthetists’ Association (OAA) in Birmingham. At the time of writing, the world is facing a unique challenge due to COVID-19 (coronavirus disease). Normal life has been put on hold as we rise to meet these challenges, and the OAA has decided to cancel this year’s ASM.

In late 2019 a new (novel) coronavirus was identified in China that caused severe respiratory disease. COVID-19, as it has subsequently been named, has been categorised as an airborne ‘High Consequence Infections Disease.’ As the virus spreads worldwide, healthcare professionals are dealing with possibly the most significant infection since the Spanish flu seen in the early part of the last century.

In this context, people’s attention rightly shifts towards the management of this international crisis, and we therefore offer only a brief summary of this year’s Abstract submissions. Abstracts cover a wide range of topics relevant to obstetric anaesthesia and reflect the 21st-century clinical environment; the concept of ‘audit’ has been replaced by ‘quality improvement’ and this category received a significant number of submissions. There are many excellent and innovative projects covering topics including improving safety and reducing complications of obstetric anaesthesia. In addition, there are several abstracts investigating ways to improve the efficiency of the service, which seem particularly relevant given the pressures facing healthcare in the UK and beyond. As always, there are a number of interesting and challenging case reports.

The OAA is keen to support and promote the future generation of obstetric anaesthetists, and so we are delighted that almost all submissions involve trainee anaesthetists. Furthermore, several abstracts were submitted from overseas adding an international flavour. We welcome submissions from our colleagues outside the UK, enabling us all to compare and contrast our practice. Collaboration and learning together feels particularly important in the current public health emergency.

Although a high proportion of submissions were due to be presented at the Birmingham meeting, inevitably there will be disappointed authors whose work was not accepted. Due to the large numbers involved, it is impossible to give individual feedback and so unsuccessful authors should seek advice from senior colleagues to explore ways in which their work could be improved. We understand the onerous nature of seeking Ethics Committee approval for clinical research, necessary for even the most straightforward project with seemingly few ethical issues. However, the OAA is bound by these stipulations and others regarding the presentation of a patient’s clinical details, even when anonymised, or the use of patient data where Caldicott Guardian approval is helpful.

Finally, we would like to thank the judges who helped to mark this year’s abstracts. They are: Sarah Armstrong, James Bamber, Sam Bampoe, Thierry Girard, Christina Laxton, Mark Nel, Nat Nguyen-Lu, Abi Richardson, Fleur Roberts, Chiraag Talati, Mark Scrutton and Gary Stocks. We would also like to thank the OAA Secretariat and the Events Team and the staff at SciGen Technologies for their help with the ePosters.

We have thoroughly enjoyed reading and reviewing the submissions for this year. Hopefully, you will also find them both stimulating and educational. We know the significant amount of work that goes into even the most straightforward project. Thank you for submitting your work to this meeting. We share your disappointment that the meeting has had to be cancelled. The OAA will work hard to ensure that accepted submissions receive a forum for presentation at a future OAA meeting.

The next few weeks and months will be challenging for all health care professionals, particularly anaesthetists and our intensive care colleagues, to whom we remain closely aligned. We wish colleagues and their families the very best as they face these challenges.

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