

INFOGRAPHICS IN ANESTHESIOLOGY

Complex Information for Anesthesiologists Presented Quickly and Clearly

TO PUNCTURE OR NOT TO PUNCTURE Dural Puncture Epidural **VS.** Standard Epidural



Dural puncture epidural (DPE) involves insertion of a spinal needle during epidural placement, confirming CSF flow.

Possible advantages:

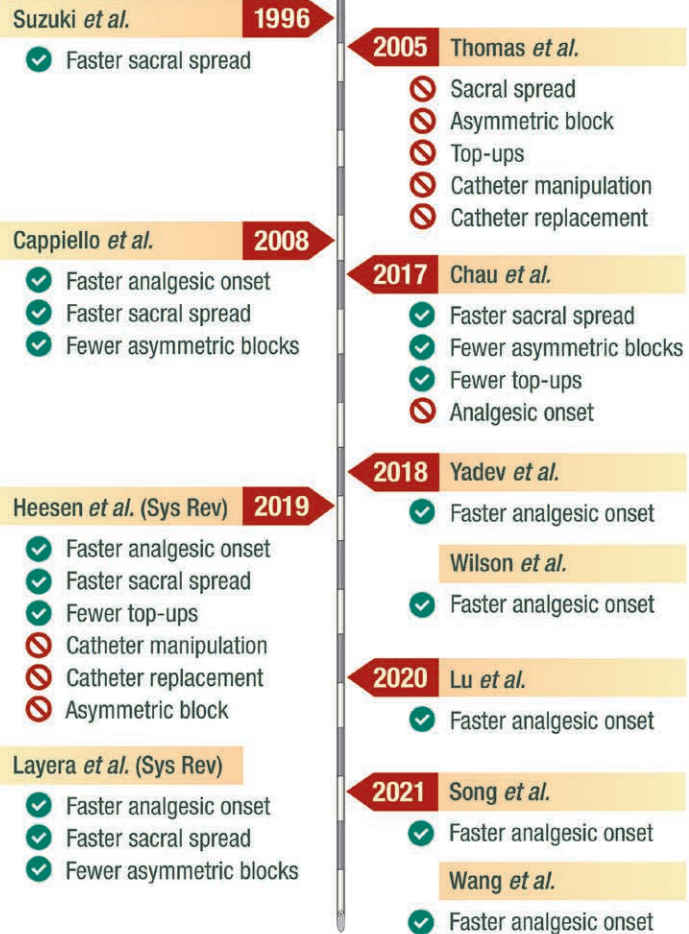
- ✓ Confirm midline placement
- ✓ Transfer of medications *via* puncture

In this issue, Tan *et al.*¹ evaluate whether DPE improves the quality of labor analgesia compared to standard epidural in *obese parturients*.

- No difference in:** Primary composite outcome
- 1 Asymmetric block
 - 2 Epidural top-ups
 - 3 Catheter adjustments
 - 4 Catheter replacement
 - 5 Failed conversion for cesarean delivery

Timeline of DPE Studies^{1,2}

Since the first description of the technique in 1996, studies comparing DPE to standard epidural have shown varying results.



Benefits of DPE in the general pregnant population are modest, and the current study highlights the lack of differences for obese parturients. Individual clinician judgement is still necessary to determine appropriate indications for DPE.

CSF, cerebral spinal fluid.

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1. Tan HS, Reed SE, Mehdiratta JE, Diomedeo OI, Landreth R, Gatta LA, Weikel D, Habib AS: Quality of labor analgesia with dural puncture epidural versus standard epidural technique in obese parturients: A double-blind randomized controlled study. *ANESTHESIOLOGY* 2022; 136:678–87
2. Segal S, Pan PH: Dural puncture epidural for labor analgesia: Is it really an improvement over conventional labor epidural analgesia? *ANESTHESIOLOGY* 2022; 136:667–9