Paternal anxiety and satisfaction in elective caesarean section

CM Oliver, JD Mathers and L Wee

Department of Anaesthesia, University College Hospita, London, UK Correspondence: cmoliver@doctors.org.uk

Whilst the overwhelming weight of data on caesarean section (CS) concerns maternal experiences, expectant fathers have historically been underrepresented. A literature search revealed only two relevant studies conducted in the past two decades; Chan demonstrated greater paternal anxiety at CS than normal vaginal delivery [1] and Capogna showed that epidural analgesia for the partner reduces paternal stress and enhances involvement in the experience of childbirth [2]. We undertook a survey of the partners of women undergoing CS under spinal anaesthesia to assess paternal preparedness and satisfaction with the process.

Methods: The partners of women undergoing elective CS for a normal pregnancy were surveyed between March and May 2010 at preoperative assessment and then again one to seven days postoperatively on the ward or by telephone interview. Participants were asked to rate preparedness, anxiety, overall satisfaction and adequacy of explanation given by anaesthetist on simple five point scales and to indicate sources of information accessed. Exclusion criterion was refusal.

Results: Thirty fathers were surveyed, of whom 18 (60%) had prior experience of CS. Fathers with no experience of CS felt more anxious and less prepared than those with previous experience (Table 1). Overall satisfaction level and anaesthetists' scores for preoperative explanation were very high (for both; median score 5, range 3-5). The most commonly accessed sources of information were friends and family, the media and antenatal classes, with all fathers accessing multiple sources.

Discussion: The results indicate that prior experience of CS is superior to other sources of accessible information at allaying perioperative anxiety and improving preparedness. The high overall satisfaction scores suggest that the degree of support and information provided was appropriate. Select individuals may however benefit from greater involvement and reassurance in the form of a supervised discussion with experienced fathers, as suggested by one participant, or the provision of video recordings of fathers discussing their experiences. This survey is limited by the small sample size and a potential for recall bias introduced by a variable interval to postoperative interview.

Table 1. Anxiety and preparedness scores. Values are median (range).

	Fathers without experience of CS Median score (range)		Fathers with prior experience of CS Median score (<i>range</i>)	
Anxiety	Prenatal	Postnatal	Prenatal	Postnatal
(1=none, 5=very anxious)	3 (1-5)	2 (1-5)	2 (1-5)	2 (1-5)
Preparedness (1=unprepared, 5= well prepared)	4 (1-5)	4 (2-5)	5 (3-5)	5 (3-5)

References:

[1] Chan K, Paterson-Brown S. How do fathers feel after accompanying their partners in labour and delivery? *Journal of Obstetrics & Gynaecology*. **22**(1):11-15, 2002

[2] Capogna G. Camorcia M. Stirparo S. Expectant fathers' experience during labor with or without epidural analgesia. *International Journal of Obstetric Anesthesia*. **16** (2) (pp 110-115), 2007.