

## Presidents Message

Happy New Year to everyone. Time truly flies, and by the time this message reaches you, January will almost be over!

January is often seen as a time for new beginnings and resolutions.

While ambitious plans are in place to reform the NHS in 2025, the system faces mounting challenges. These include workforce shortages, extended waiting times in A&E, the strain of a challenging winter virus season, a pressing need to reduce waiting lists, and crucially, the mental health and well-being of NHS staff, particularly our junior doctors.

While we all recognise that there are no quick fixes to the challenges facing our NHS, it is vital that we remain positive, acknowledge that meaningful improvements will take time and strive to maintain high morale—for ourselves and for those working alongside us.

As the President of YSOA, I want to assure you that our society is committed to fostering collaboration, creating new opportunities for colleagues, and providing a platform to share knowledge and experiences on a larger scale.

I am delighted to share that following the success of our 2024 Annual Scientific meeting in Hull, we held a highly commended September evening anniversary meeting at Hinsley Hall in Leeds. The event featured excellent talks and engaging discussions, which has been summarised in this newsletter by our trainee representatives (Dr James Laloo, Dr Ben Green, Dr Edward Knight) I would like to acknowledge and thank the trainee reps for their ongoing support and valuable contribution to the society.

We are now excited to announce this year's Annual Scientific Meeting will be held in **Sheffield on the 29th April**.

Our South Yorkshire team is working tirelessly to make this another impactful event. We have secured some fantastic speakers headlined by: 'Humphrey Davy' award winner, Dr Emira Kursumovic, who will be presenting results from NAP7 project in obstetric patients.

We look forward to gathering again as a regional team and creating another informative educational day and valuable networking opportunity.

## Presidents Message (cont)

Registration details are included in this Newsletter and will shortly be available on the website, please encourage your anaesthetic colleagues, midwifery staff, and obstetricians to register promptly.

Finally, I would like to express my heartfelt thanks to Dr Kay Robins for her outstanding contribution as the editor of the newsletter since 2017.

Kay will continue to be a valued member of the YSOA and we deeply appreciate her ongoing support.

As she steps down from this role, I am pleased to announce that Dr James Wright, Consultant Anaesthetist from York, will be taking over as the new editor. Please join me in warmly welcoming James to the newsletter.

I look forward to catching up with all old and new faces of our regional multidisciplinary team soon.

See you in Sheffield !!!-**29th April**

Thank you everyone!



Best wishes  
Anju Raina  
Consultant Anaesthetist  
President Yorkshire Society of Obstetric Anaesthesia



Crown Plaza Royal Victoria Hotel, Sheffield, Annual Scientific Meeting, Tuesday 29th April 2025

## Dates for your diary

### YSOA Annual Scientific Meeting 2025

Crown Plaza Royal Victoria Hotel Sheffield

Tuesday 29th April 2025

Contact: Wayne Sheedy at

obstetricday@hotmail.co.uk or  
wayne.sheedy@talktalk.net

### YSOA Anniversary Meeting

Friday 3rd October 2025

Fee £25, includes Dinner

Contact: Wayne Sheedy at

obstetricday@hotmail.co.uk or  
wayne.sheedy@talktalk.net

## Membership details

Membership is free to all trainees and consultants in the Yorkshire and Humber region. Membership ensures you receive information regarding upcoming events and this amazing newsletter!

If you wish to become a member please forward the following information to:

obstetricday@hotmail.co.uk

Name:

Grade:

Employing Trust:

Locality if in a training post (East/South/  
West)

A reliable contact email address:



# Yorkshire Society of Obstetric Anaesthetists

Yorkshire Society of Obstetric Anaesthetists Annual Scientific Meeting  
Crown Plaza Royal Victoria Hotel Sheffield, 29th April 2025



Time	Session
0830 – 0915	Registration
0915 – 0920	Welcome / Introduction Dr Anju Raina, Consultant Anaesthetist, HUTH, President YSOA
<b>Session 1 – Chair:</b>	
0920 – 1000	NAP 7 Obstetric Cardiac arrest Dr <del>Emilia Kusunovic</del> , Consultant <del>Anaesthetist</del> , Royal United Hospital Bath
1000 – 1040	High neuro-axial block in obstetrics TBC
1040 – 1110	Tea / Coffee
<b>Session 2 – Chair:</b>	
1110-1150	Obstetric Quick Reference Handbook Dr Kirsty Maclellan, Consultant Anaesthetist, Manchester University NHS Foundation Trust
1150– 1230	National Maternity Early Warning Scoring system Dr Deborah Horner, Consultant in Anaesthesia and Intensive Care, Bradford Teaching Hospitals NHS Trust
1230-1330	LUNCH
<b>Session 3 – Chair:</b>	
1330 – 1410	Maternal medicine network Yorkshire and Humber Dr Tess Bonnett, Consultant Obstetrician, Sheffield Teaching Hospitals NHS trust Dr Debbie Scott, Consultant Midwife, Leeds Teaching hospitals NHS trust
1410 – 1440	Trainee presentations
1440 – 1510	Pro-Con Debate: "Should Birth partners be present during a GA LSCS?" Pro-side: TBC Con-side: TBC
1510 – 1540	Tea / Coffee
<b>Session 4 – Chair:</b>	
1540 – 1610	ASPE standards and simulation for obstetric emergencies TBC
1610 – 1640	Management of pulmonary hypertension in pregnancy: potentially Dr Ruth Newton, Consultant Anaesthetist Sheffield Teaching Hospitals NHS trust
1640 – 1700	Prizes and Close



Crown Plaza Royal Victoria Hotel, Sheffield

## Essential Information

- 5 CPD points applied for from the Royal College of Anaesthetists

### Meeting Fee (members):

- Consultants £130 (£120)
- SAS/Trainee £80 (£75)
- ODPs/midwives £25 (£25)

Payment by BACS to following Account (Yorkshire Society of Obstetric Anaesthetists Ltd):

Acc No:60660963

Sort Code:30-98-97

Bank: Lloyds TSB

Email remittance:  
wayne.sheedy@talktalk.net

### Abstract Prizes

- Oral Presentation £100
- Poster £50

For full programme, bookings, abstract submission guidelines and further details see meeting website:

<http://ysoa.org.uk>



YORKSHIRE  
SOCIETY  
OBSTETRIC  
ANAESTHETISTS



## YSOA website and Podcasts

Podcasts from the ASM 19 are available to download from our website [www.ysoa.org.uk](http://www.ysoa.org.uk)

Username:

ysoa@gmail.com

Password:

'%\$\*ysoahull@\$)



## Dates of courses

### Obstetric Anaesthetic Emergency Course for CT2s

Hull Clinical Skills Facility                      tbc

Bradford    tbc

For more information please go to the Yorkshire and Humber-side Deanery Website ([hyp-tr.clinical.courses@nhs.net](mailto:hyp-tr.clinical.courses@nhs.net))

### TOASTY Advanced Obstetric Course

for senior trainees and consultants

Hull Clinical Skills Facility                      22<sup>nd</sup> October 2025

Contact: [anju.raina@nhs.net](mailto:anju.raina@nhs.net) or [Emily.clappison@nhs.net](mailto:Emily.clappison@nhs.net)

### Yorkshire Difficult Airway Course

Hull Clinical Skills Facility                      1<sup>st</sup> December 2025

Contact: [Emily.clappison@nhs.net](mailto:Emily.clappison@nhs.net)?

# **YSOA 2024 Anniversary Meeting Review**

## ***Hinsley Hall, Leeds, 20th September 2024***

### **Case of suxammethonium apnoea: Dr Elizabeth Horsley**

Dr Horsley presented an interesting case of a 34+2 primip DCDA twins treated for sepsis and AKI. The patient underwent a Cat 1 LSCS for foetal bradycardia requiring a general anaesthetic due to failed regional anaesthesia. On attempted waking, she had no response to nerve stimulation so was taken to ICU for further monitoring. On testing for suxammethonium apnoea she was found to have atypical phenotype with a low cholinesterase level. It broached the interesting argument of the use of suxammethonium vs non-depolarising NMBDs with an even split between attendants.

### **Rare cardiac complications in a pregnant patient: Dr Chris Hendron**

Dr Hendron spoke regarding the case of a G2P1 37yo patient presenting with shortness of breath, and hypoxia. She was initially treated as community acquired pneumonia and pulmonary embolism. Despite this she had ongoing deterioration and underwent a category 2 LSCS under general anaesthesia due to inability to lie flat. She continued to worsen from a respiratory and cardiovascular perspective and was found to have vegetation on her mitral valve with gross mitral regurgitation. She underwent metallic mitral valve replacement and had further critical care input. This was an intriguing case with interesting points made regarding the masking of symptoms by normal physiological changes of pregnancy and other more classical complications. It also highlighted the importance of MDT approach in any unwell partituent.

### **A near miss of Duchenne Muscular Dystrophy: Dr Dinesh Soundararajan**

Dr Soundararajan presented his case of a patient undergoing a Cat 1 LSCS under spinal found to be a carrier of DMD. He highlighted areas of the patient's care including the presentation of DMD and the presentation of carriers, demonstrating that 2.5% of carriers will still get symptoms. He highlighted that these patients can have muscle weakness, cardiomyopathy and conduction defects, all of which can cause significant problems for patients during pregnancy and labour. In particular, patients may become symptomatic during pregnancy or labour and be prone to deterioration. Important takeaways included the anaesthetic considerations of DMD including using regional anaesthesia where possible and avoiding the use of suxammethonium and volatiles.

## **Contact Us**

YSOA Administrator:

Mr Wayne Sheedy

01482 624069

wayne.sheedy@talktalk.net

Visit us on the web at  
[www.ysoa.org.uk](http://www.ysoa.org.uk)

Please email any comments or feedback regarding this newsletter to W Sheedy as above.

Please forward this newsletter to your obstetric anaesthetic colleagues and trainees to let them all know all the news – thank you.

Kay Robins , Editor  
(York)

### **A rare cause of hypertension in pregnancy: Dr Thomas Smith**

Dr Smith took us through the case a 34 year old woman with a background of PCOS who presented at 33 weeks with a raised blood pressure. She had ongoing worsening blood pressure, with no proteinuria and was on escalating therapy, ultimately ending up on IV beta blockers. She was ultimately found to have an incidental phaeochromocytoma for which she had an elective LSCS and a subsequent laparoscopic adrenalectomy. The case highlighted how this can mimic pre-eclampsia and its disastrous if missed, therefore demonstrating the high vigilance we need to have in atypical hypertensive presentations.

### **A case of severe PET and pulmonary oedema: Dr Owais Shah**

Dr Shah spoke regarding an interesting case of severe PET, focussing on the impact of socio-economic status on healthcare access. The patient in question was a single parent, with a lack of family support and therefore didn't attend appointments she was advised to- this resulted in delayed presentation of severe PET and the need for a category 2 LSCS. This case demonstrated the impact that someone's socio-economic background can have on their care. Dr Shah highlighted the latest MMBRACE report showing that women in deprived areas continue to have the highest mortality rates and how this is something we need to be addressing on all levels.

### **Atypical presentation of tuberculosis in pregnancy: Dr Steve Wyatt**

Dr Wyatt gave a fascinating talk on the presentation of a patient with TB during her pregnancy with requirement for ICU. MDT decisions were made between the intensive care, obstetric and paediatric teams and plan was made for LSCS under GA and both her and baby made good recovery. This was an interesting case highlighting the presentation of TB, the impacts on pregnancy and the key importance of a collaborative approach to both maternal and foetal care in unwell patients. It also demonstrated the steps we need to take in these cases for both protection of the patient and of the staff.

James Lalloo