



## Future blood pressure monitoring for cesarean delivery

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To the Editor:

I read with interest the study by Juri et al. [1] regarding hemodynamic monitoring for cesarean delivery. I would like to discuss the implication of the study and future prediction.

Juri et al. concluded that using ClearSight™ had fewer incidence of maternal hypotension than conventional non-invasive blood pressure monitoring. I assume that the study showed the clinical benefit of using continuous monitoring, not the device. Continuous monitoring is theoretically ideal; however, the routine application to all cesarean patients is not feasible, including the costs, and cannot be justified by the current evidence [2]. Systolic blood pressure (SBP) is commonly considered as a parameter reflecting organ perfusion, but it is less meaningful than mean arterial pressure (MAP) [3]. Although MAP sounds physiologically reasonable and the recent experts' opinions support the importance [2], there are no well-designed studies. We conducted a retrospective study and found minimum MAP < 70 mmHg and longer duration of SBP < 100 mmHg were related to lower umbilical arterial pH [4]. Not only value but also duration of hypotension is of importance.

### Compliance with ethical standards

**Conflict of interest** The author declares that he has no interests to disclose.

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