

Uterine exteriorization versus insitu repair at caesarean section : influence on maternal morbidity.

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This is a randomized controlled study to compare the influence on caesarean section maternal morbidity of uterine exteriorization with that of insitu repair. Subjects were two hundred and sixty five women undergoing delivery by caesarean section. Two intraoperative readings of pulse rate, mean arterial blood pressure and arterial oxygen saturation were taken. Preoperative and day 3 haemoglobin concentrations were determined. Intraoperative vomiting immediate postoperative complications, day 1, 2 and 3 puerperal pain scores and infectious morbidity were assessed. Satisfaction regarding the operation was assessed by a satisfaction score after six weeks. No clinically significant differences between uterine exteriorization and insitu repair were found in pulse rate, mean arterial blood pressure, arterial oxygen saturation and haemoglobin changes. Vomiting was not reported in any of the groups and pain scores were similar, but in both groups day - 1 pain scores were higher averaging 5 - 6/10 despite the unit's multi modal analgesia policy. Immediate postoperative complications, infectious morbidity and satisfaction scores were similar in both groups. The position of the uterus at the time of repair does not affect the caesarean section maternal morbidity. Preoperative antiemetics minimize the intraoperative vomiting and postoperative pain on day - 1 was due to inadequacy of analgesia. The choice of uterine repair technique should depend on the surgeon's experience.