Second Stage Caesarean Section, Maternal Morbidity and Neonatal Morbidity

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Abstract: The study is to assess the complication to the mother and baby during the second stage caesarean section and after the caesarean section between the month of November 2013 to November 2014 in the labor ward admitted in the Siddhartha medical college, Vijayawada. The maternal complication that encountered during surgery are post partum hemorrhage, extension of uterine angles, trauma to uterine artery, hematuria, continous bladder drainage after surgery, need for blood transfusion, wound infection postoperative fever, secondary suturing. The neonatal complication are low APGAR, meconium stained liquor, NICU admission neonatal sepsis, intra uterine fetal demise.out of 3422 caesarean section performed 52 were in second stage caesarean in that PPH 13% Uterine angle involved in23% B- Lynch stitch applied to12% postoperative fever23% wound infection 23% secondary suturing 23% blood transfusion 23%hematuria2% continous bladder drainage 23%. The babies admitted in NICU 23% meconium stained 23% intrauterine fetal demise1% neonatal sepsis2%.

Keywords: Maternal morbidity, neonatal morbidity, post partum hemorrhage, postoperative fever, second stage caesarean section.

I. Introduction

Decision making in second stage is one of the greatest challenges in current obstetric practice. The rate of caesarean sections have risen in the past two decades and may be associated with trial of labour in institutional deliveries and decrease in difficult instrumental deliveries, caesarean section at full cervical dilation after 2 hours is limited. It is technically more to difficult to perform caesarean section with an impacted head in the pelvis , and is associated with trauma to lower uterine segment , uterine angle extension, uterine artery injury, as well as increase hemorrhage and infection, longer surgery time, increased post operative fever, longer hospital stay to patient.

This study includes neonatal complications like meconium stained liquor, low APGAR babies, NICU admission neonatal sepsis, intra uterine fetal demise.

II. Material and methods

This is a prospective study between the between the month of November 2013 to November 2014 in the department of OBG in the Siddhartha medical college, Vijayawada. The study is to assess the complication to the mother and baby during the second stage caesarean section and after the caesarean section . out of 3422 caesarean section performed 52 were in second stage caesarean.

Inclusion criteria for the study was singleton pregnancy of 37 weeks or moiré gestation, in primigravida, in multigravida with previous normal vaginal deliveries. Exclusion criteria for the study women with previous caesarean section, preterm deliveries, anomaly baby. Information collected in structured format and data, relevant obstetric history. Indication for caesarean section, intratum partum complication, postpartum complications, neonatal complications also noted.

Maternal complications like PPH, trauma to lower uterine segment, uterine angle extension, uterine artery injury, as well as increase hemorrhage and infection, longer surgery time, increased post operative fever, wound infection secondary suturing, longer hospital duration to patients. The neonatal complications like meconium stained liquor, low APGAR babies, NICU admission neonatal sepsis, intra uterine fetal demise.

Results: table