

RETROSPECTIVE STUDY: PREVALENCE OF
EPISIOTOMY BREAKDOWN IN HOSPITAL
PAKAR SULTANAH FATIMAH, MUAR



Author :Ruzila R, Azlina D, Nazrah A, Siti Salmiah S
Institution : Nursing Unit, Hospital Pakar Sultanah Fatimah, Muar.

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Introduction

In developing countries including Malaysia, routine episiotomy assisted vaginal delivery is a common practice. Care of the perineum, both during and after childbirth, has long been a topic of interest in obstetrics[1]. It is important to quantify the rates of perineal wound infections and identify the risk factors so that health professionals and managers can provide appropriate management [2,3].

This study aimed to compare the episiotomy breakdown rate in women delivered, admitted for episiotomy wound breakdown in Obstetrics and Gynaecology ward on 2018 in Hospital Pakar Sultanah Fatimah Muar.

Objectives

- i. To identify the difference in rate of episiotomy breakdown
- ii. To determine the difference of primigravida and multigravida in rate of episiotomy breakdown.

Materials and methods

A retrospective review of birth data of women delivering with episiotomy breakdown on 2018 in HPSF. Descriptive analyses was done using the SPSS.

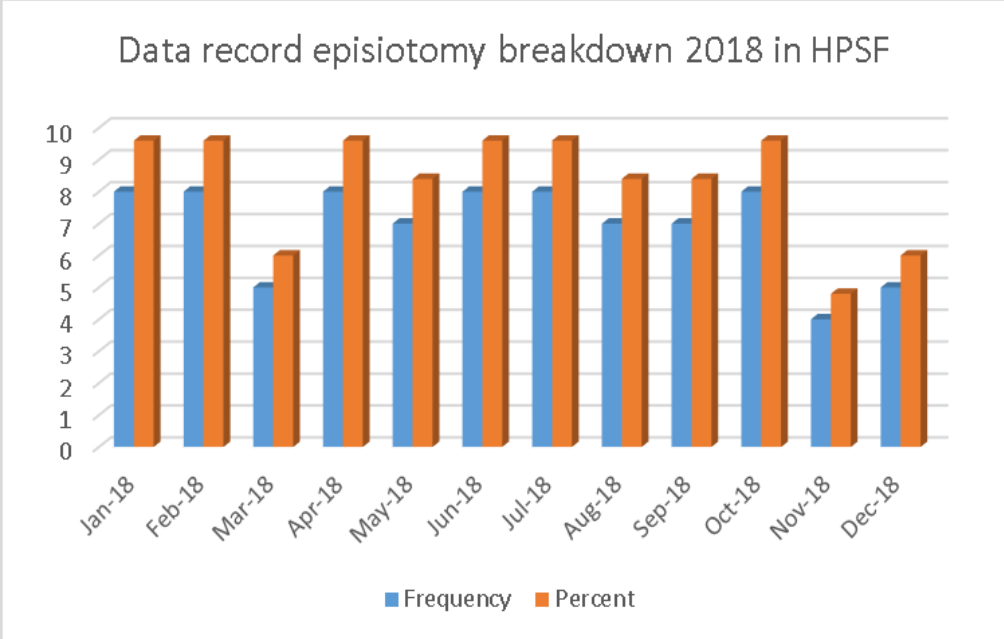


Figure 1: Monthly data record of episiotomy breakdown 2018

Results

To identify the difference in rate of episiotomy breakdown

Demographic

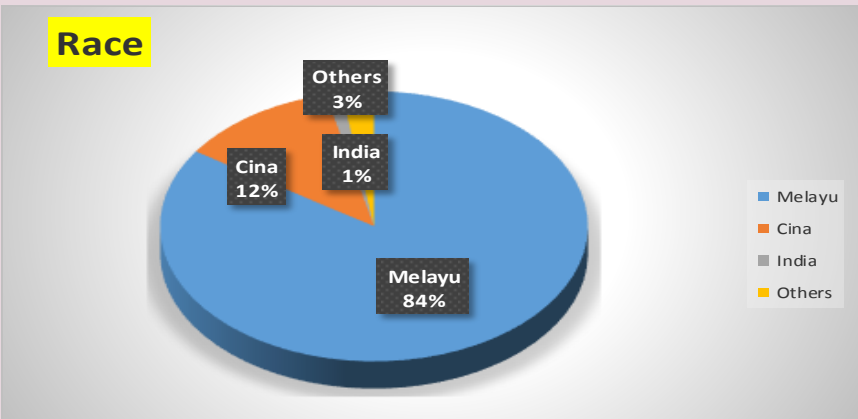


Figure 2: Distribution of race of women admitted for episiotomy wound breakdown in Obstetrics and Gynaecology

Age

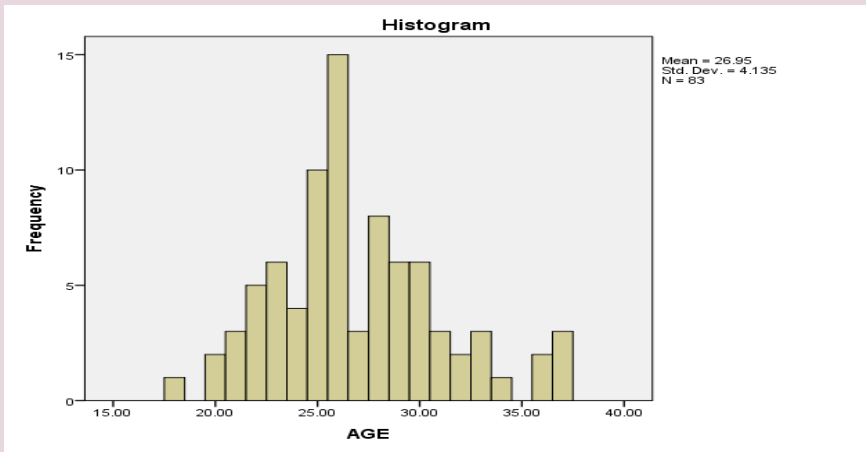


Figure 3: Age of women admitted for episiotomy wound breakdown in Obstetrics and Gynaecology

To determine the difference of Primigravida and multigravida in rate of episiotomy breakdown.

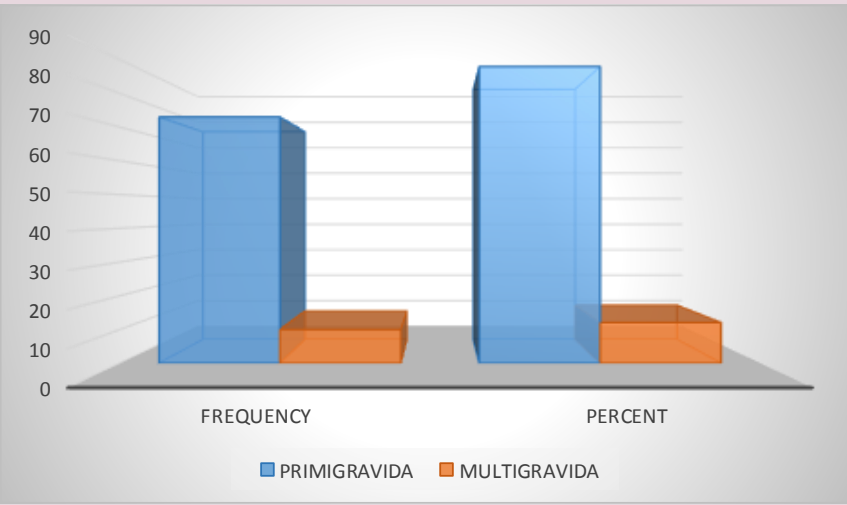


Figure 4: Primigravida and multigravida of women admitted for episiotomy wound breakdown in Obstetrics and Gynaecology ward at HPSF

Discussion

The rate of episiotomy breakdown was found in 73 (88%) primipara women and 10 (12%) in multipara women [1, 2]. Also, it was determined that as the age and parity of the women decreased, the rate of episiotomy breakdown increased [3]. Therefore, health education regarding care of episiotomy wound breakdown before patient discharge together with collaboration healthcare provider for home visit should be performed [3].

Conclusion

The rate of episiotomy breakdown was observed to be high, especially in primipara women. Management of perineum is an important component of vaginal birth.

References

1. Bick D (2009). Postnatal management of the perineum. British Journal of Midwifery 17(10): 571–8
2. National Institute for Health and Clinical Excellence (2007) Intrapartum Care: Care of Healthy Women and Their Babies During Childbirth. NICE Clinical Guideline 55. NICE. London
3. National Institute for Health and Clinical Excellence (2008) Postnatal Care: Routine Postnatal Care of Women and Their Babies. Clinical Guideline 37. NICE, London