

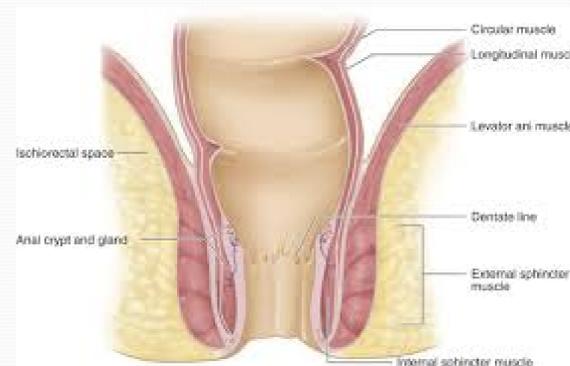
A Retrospective Case Note Review on Outcomes of Delivery After Previous Anal Sphincter Injury

Langrish A, Rashmi R, Khadra M

Poole Hospital NHS Foundation Trust, United Kingdom

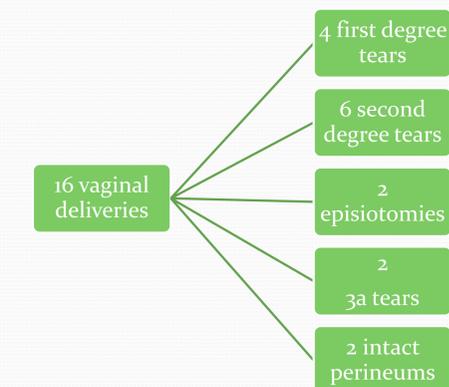
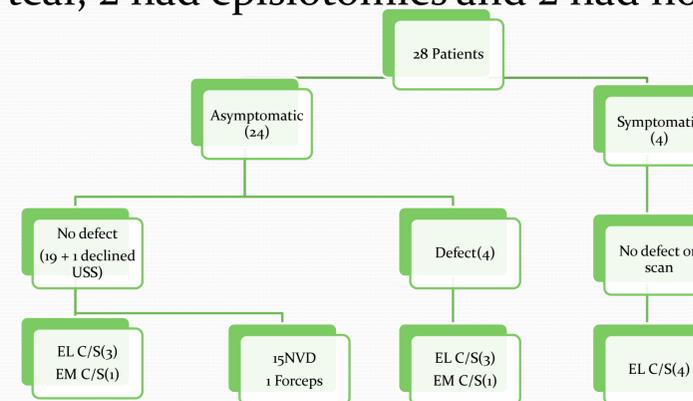
Problem Statement

Obstetric Anal Sphincter Injury occurs in approximately 1% of all vaginal deliveries; however can go onto to cause great maternal morbidity and anxiety. The purpose of this study was to assess the mode of delivery after previous anal sphincter injury and to assess the recurrence rate. This information will guide patient specific counselling antenatally.



Results

28 patient's notes were reviewed. Mean age of 31, majority being para one (24). Of the 28 previous anal sphincter injuries 11 had 3a tears, 14 had 3b tears, 2 had 3c tears and 1 patient declined USS. Endo-anal ultra-sound of these patients showed four persistent sphincter defects. At booking of a subsequent pregnancy four patients were symptomatic (none of which had persistent anal sphincter defect). Elective caesarean section was offered to women with persistent anal sphincter defects regardless of symptoms and to those with no defect but symptomatic. Of the 28 patients; 12 (43%) delivered via caesarean section (10 elective and 2 emergency), 16 (57%) had vaginal deliveries. Of the 16 vaginal deliveries; 2 (12.5%) had recurrent anal sphincter injury, 6 had second degree tear, 2 had first degree tear, 2 had episiotomies and 2 had no perineal trauma.



Method

Retrospective case note review of 28 patients that had previously sustained a anal sphincter injury between August 2007 to March 2014. All patients were under the care of one the consultant obstetricians and Poole Maternity Unit.

Conclusion

This retrospective review demonstrates that a personalised antenatal assessment should be carried out for all patients with previous anal sphincter injuries. Patients may have a personal preference on mode of delivery. However 87.5% of patients delivering subsequent pregnancies vaginally did not sustain a further anal sphincter injury, and therefore antenatal counselling is of high importance.