

ADIT ON INDICATIONS FOR CAESARIAN SECTIONS BASED ON MODIFIED ROBSON ITERIA

Ruthra, Y¹, Rubavinoth, K¹, Raguraman, S¹

¹*Professorial unit, Teaching hospital, Jaffna.*

Introduction

Cesarian section with appropriate indication is an essential lifesaving obstetric surgery. Even though it is unavoidable in obstetrics practice, it carries significant morbidity on mother in addition to economic burden on health system. Therefore, auditing the indication for caesarian section based on ten group classification system will help us to self-evaluate our value with other institution and compare past and presence of our self for a well appropriate future practice.

Objectives

To evaluate the indication for caesarian sections and compare it with national and international practice.

Methods

A retrospective audit was conducted in professorial unit, Teaching Hospital Jaffna using an observational checklist which include basic information about the patient and classification of indication for caesarian section according to the Robson criteria from 20th February 2022 to 20th August 2022.

Results

Total number of childbirths occurred in that period was 552 out of them 231 were caesarian sections with the rate of 41.8%. The leading category for caesarian section was nullipara single on cephalic >37 weeks section done before labor (Robson group 2B), which represents 24.67% and the main indications were medical disorder complicating pregnancy, fetal growth restriction and pregnancy following assisted reproduction. The second leading category was singleton nullipara cephalic more than 37 weeks induced (Robson group 2A) which represents 19.48% and 64% of which was contributed by unsuccessful induction especially early induction for diabetes mellitus complicating pregnancies. The leading indication for preterm caesarian section was pre-eclampsia. Past section contributed 24.55% of the caesarian sections. Women who underwent caesarian section belonging to age group between 30 - 40 represents the majority (55%) indicating advanced maternal age is significantly contributing to maternal morbidity.

Conclusion

This preliminary audit shown more caesarian section were done in category 2A and 2B. Since, professorial unit, Jaffna is involving with medically complicating pregnancy management and assisted reproductive technology treatment in northern province, caesarian section rate is higher than the standards including category 2A and 2B. Changes were implemented and planned to carry out re-auditing in the future. This will improve caesarian section rate in future.