

Research Article

Obstetric Hysterectomy: Retrospective analytical study at P D U Medical College, Rajkot

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Abstract

Objective: To find out indications of obstetrics hysterectomy, related complications and associated maternal morbidity and mortality.

Methods: A Retrospective Analytical Study was performed at Dept of obs & gynec P D U Medical College, Rajkot over a period of 3 yrs during 2011-2013. Evaluation of Maternal age, parity, SE status, booking status, obstetric risk factors, duration of hospital stay, indications of hysterectomy, type of hysterectomy, intra-op and post-operative complications, blood transfusions and maternal morbidity and mortality was done.

Results: Total 37 cases were noted during period of 3 yrs. Out of which most common indication of obstetric hysterectomy is rupture uterus -19(51%). No maternal mortality was noted in all 37 cases. In 70% cases total and 30% cases subtotal hysterectomy were done. Wound gap is most common complication in 5 cases followed by bladder injury in 3 cases.

Conclusion: Our retrospective analytical study has concluded that though morbidity is associated with obstetrics hysterectomy, it is a life saving procedure if decision was taken timely with available resources and blood transfusions and maternal mortality can be reduced.

Keywords: Obstetrics hysterectomy, maternal morbidity and mortality, rupture uterus.

1. Introduction

Over 500,000 women die each year due to complications of pregnancy and childbirth, a number that has remained relatively unchanged since 1990, when the first global estimates of the burden of maternal mortality were developed (WHO 2005)¹. As we all known Obstetric hemorrhage is most common cause. Obstetric Hysterectomy is a last resort to save maternal life². Obstetric hysterectomy is the removal of uterus at the time of caesarean section, following caesarean section, immediately after vaginal delivery or in the period of puerperium³. The maternal outcome greatly depends on timely decision, the surgical skill and the speed of performing obstetric hysterectomy⁴.

2. Material and Methods

A Retrospective Analytical Study was performed at Department of Obstetrics and Gynaecology, P D U Medical College, Rajkot over a period of 3 years during 2011-2013. All patients who have undergone for obstetrics hysterectomy were included in study. Detailed analysis was done of each case. Evaluation of Maternal age, parity, SE status, booking status, obstetric risk factors, duration of hospital stay, indications of hysterectomy, type of hysterectomy, intra-op and post-operative complications, blood transfusions and maternal morbidity and mortality was done.

3. Results

During study period time total 37 patients included. Patients of different age group and parity, Socioeconomical status, booking status and community were included. We have evaluated indications of obstetrics hysterectomy. Out of 37 cases 8 (22%) were booked cases while 29 cases (78%) were unbooked.

Most common was rupture uterus in 18 cases (51%). Others are morbid adherent placenta-3(8%), perforation during termination of pregnancy-3(8%), atonic PPH-3(8%), lower genital tract trauma-1(3%), ectopic pregnancy-1(3%), invasive mole-1(3%), DIC-1(3%), placenta previa-2(5%) and combined atonic and traumatic PPH-3(8%).

26 cases (70%) have undergone total hysterectomy while 11 cases (30%) have undergone subtotal hysterectomy. Most common complication was wound gap in 5 cases while others were bladder injury in 3, intra op cardiac arrest in 1, febrile illness in 1, peroneal nerve injury in 1 and ARF in 1 cases were noted. Average hospital stay was 14 days and all patients were required blood transfusions. No maternal mortality was noted in all 37 cases.

Table 1: Indications of Obstetrics Hysterectomy

Indications of obstetric hysterectomy		
	Number of patients	%
Rupture uterus	19	51
Atonic PPH	3	8
Perforation during termination of preg	3	8
Morbid adherent placenta	3	8
Invasive Mole	1	3
lower genital track trauma	1	3
Placenta Previa	2	5
DIC	1	3
Ectopic pregnancy	1	3
Combined Atonic & Traumatic PPH	3	8

Table 2: Type of Obstetrics Hysterectomy

Type of Hysterectomy		
	Number of patients	%
Total	26	70
Subtotal	11	30

Table 3: Complications

Complications	
Intra-op cardiac arrest	1
Bladder Injury	3
Febrile illness	1
ARF	1
wound Gap	5
Peroneal nerve palsy	1
Total	12(32%)

4. Discussion

Obstetric hysterectomy is a lifesaving procedure. Prompt decision and good surgical skills are the two factors related with surgeon's acumen that affect the maternal outcome⁵.

Most common was rupture uterus in 18 cases (51%) in our study which was found similar to study of Nooren M et al. (50%)⁶. In our study no maternal death noted similar to Praneshwari Devi *et al*⁷ while Nooren M et al⁶ have noted 15%. In our study 70% cases were having total hysterectomy and 30% were subtotal while Mrinalini *et al*⁸ reported rate 40% subtotal hysterectomies in their series.

5. Conclusion

Our retrospective analytical study has concluded that though morbidity is associated with obstetrics hysterectomy, it is a life saving procedure if decision was taken timely with available resources and blood transfusions and maternal mortality can be reduced.

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