



A COMPARATIVE STUDY OF EPISIOTOMY REPAIR : ABSORBABLE SYNTHETIC VERSUS CHROMIC CATGUT SUTURE MATERIAL

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ABSTRACT

A PROSPECTIVE COMPARATIVE STUDY HELD AT IOG FOR A PERIOD OF 12 MONTHS, INVOLVING 100 WOMEN IN EACH GROUP WITH UNCOMPLICATED VAGINAL DELIVERY WITH EPISIOTOMIES., ONE GROUP REPAIRED WITH SYNTHETIC POLYGLACTIN AND OTHER WITH CHROMIC CATGUT, POSTPARTUM MORBIDITY WAS STUDIED. THE RESULTS WERE STUDIED IN TERMS OF PAIN PERCEPTION AT 48 HRS, 7DAYS, 6 WEEKS, WOUND HEALING IN BOTH GROUPS & STASTICALLY CORRELATED.

KEYWORDS

INTRODUCTION:

Although the routine use of episiotomy still remains controversial, if done an ideal suture material and suturing technique must be used. Our study is to compare the effect of two different suture materials, the traditional chromic catgut with that of synthetic polyglactin and their effect in postpartum morbidity was followed up.

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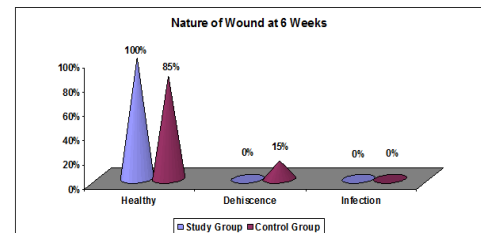
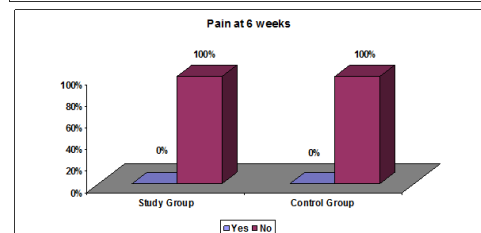
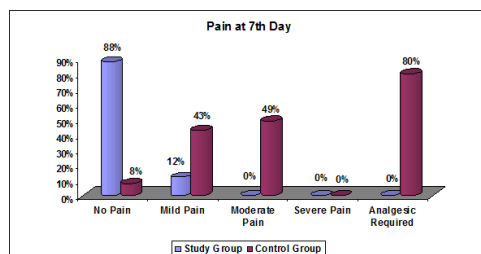
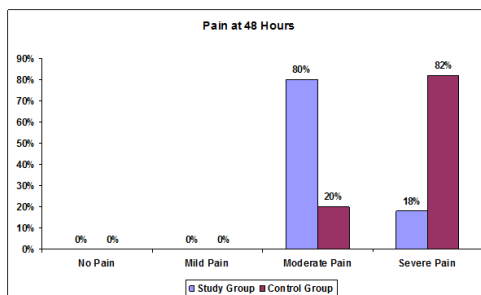
To compare absorbable synthetic suture with chromic catgut sutures for episiotomy repair with respect to pain, analgesic requirement, wound dehiscence, long term pain and dyspareunia.

METHOD:

A prospective comparative study held at iog for a period of 12 months from january 2015 to dec 2015. This study involved 100 women in each group with uncomplicated vaginal delivery requiring episiotomies/2nd degree perineal tears., one group repaired with 1-0 synthetic polyglactin and other with 1-0 chromic catgut, postpartum morbidity was studied. All episiotomies were repaired under local anesthesia using single continuous subcuticular perineal sutures by postgraduates. Mothers were interviewed at 48 hours, 7 days, 6 weeks regarding pain perception, analgesic requirement. Local examination was done for nature of healing.

RESULTS :

This study commenced with 100 women in each group who underwent episiotomy /perineal laceration repair. Descriptive stastics were utilised and all results are presented in percentages. Stastical significance was $p < 0.05$. The 100 women in each group were followed up at 48 hrs, 6 weeks and 12 weeks. In polyglactin (study) group, 81% primi, 19% multi. In chromic group (control) 84% primi, 16% multi. At 48 hours, only 19.2% had severe pain requiring analgesics while chromic group had 80.8% with severe pain, which is stastically significant $p < 0.05$. On 7th day 96% had no pain of which 88% belonged to study group. No patient in study group required analgesics while 80% in control group required analgesics. Women in study group reported significantly less pain (21.8% Vs 78.2%). Analgesic requirements were nil at 15 days while chromic group 15% still required analgesics. Both groups were comfortable without pain at 6 weeks. Higher incidence of wound dehiscence in control group compared to study group (15% Vs 0%), stastical significance $p < 0.05$.



CONCLUSION:

In our study, fast absorbing synthetic polyglactin, is found to be effective in reducing some morbidity associated with pain, wound

healing following perineal repair. Our study shows the distinctive advantage of polyglactin over chromic catgut as far as subjective pain perception, analgesic requirement, wound dehiscence. Hence rapidly absorbable form of polyglactin may be considered in place of traditional chromic catgut in perineal repair in all government maternity units.

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