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SURVEY OF OBSTETRIC ANAL SPHINCTER INJURY (OASIS) AND PELVIC FLOOR DISORDER (PFD) AND KNOWLEDGE AMONG WOMEN IN THE SECOND, THIRD TRIMESTER OF PREGNANCY AND PERIPARTUM PERIOD

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Introduction

Perineal injury is common during vaginal or instrumental delivery and the overall incidence is 2.9% in the UK. High BMI, smoking and macrosomic baby may contribute to perineal injury[1]. Pelvic floor disorders (PFD) can lead to urinary incontinence (UI), bowel incontinence, pelvic organ prolapse and dyspareunia[2,3]. Incidence of PFD can be reduced through education and training [4].

Aims

To assess the awareness and knowledge of pelvic floor muscle training during pregnancy, PFD following vaginal and instrumental delivery, pelvic floor exercises (PFE) in women during pregnancy and postpartum period and the consequences of perineal trauma in a tertiary centre.

Methods

This was a prospective survey conducted from September 2022 to November 2022 at University Hospitals of Leicester NHS Trust. The survey included pregnant and postpartum women.

Results

A total of 270 women between the age group (17-52 years) completed the survey. 43% were antenatal and 57% were postnatal women. 46% of the women who had an instrumental delivery had varying degrees of perineal tear. 3% of the women had developed symptoms of UI.

Overall, the mean percentage of women who were aware of PFE and perineal trauma were 38%, 30% were aware of only PFE, and 32% (87) women were not aware about the PFE & PFD. 83 out of the 87 women who were not aware of the PFE, perineal injury risks belonged to ethnic minorities.

When evaluating the OASIS preparedness questions, 38% of women reported that their provider had not discussed about perineal trauma.

Conclusion

This survey highlights the presence of racial disparities in women pursuing antenatal care and highlights the importance of delivering culturally sensitive information to educate women of diverse backgrounds. Comprehensive antenatal education should be targeted to all women despite their parity, ethnicity, education status, or proficiency in health literacy to minimise the risk of perineal trauma.

References

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