#565 Obstetrical Anal Sphincter Injuries & the Need for Adequate Care

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## Characteristics of Perineal Clinics Globally

<table>
<thead>
<tr>
<th>Location</th>
<th>Staff</th>
<th>Hours of Operation</th>
<th>Population Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>UK</td>
<td>Gynecologists 8, Obstetricians 1, Colorectal surgeons 1</td>
<td>Monthly to Weekly</td>
<td>Postpartum women with OASI</td>
</tr>
<tr>
<td>Ireland</td>
<td>Nurse practitioners 1, Registered nurses 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>USA</td>
<td>Physiotherapists</td>
<td></td>
<td>Any woman with perineal injury</td>
</tr>
</tbody>
</table>

### Services Provided
- Vary with staff and resources
- Include history taking, pelvic exam, endoanal ultrasound, neurophysiological assessments, and manometry

### Common Themes
- Impact of OASI on women’s short and long term physical and emotional health
- Need for more information and care to be provided to women with OASI (women often do not know exact nature of their OASI or its consequences)
- Need for education and training of healthcare providers on risk factors for, and diagnosis and treatment of, OASI
- Need for multidisciplinary specialist perineal clinics
- Need to gain awareness of and support for such clinics among obstetricians and nurses at the RAH

## Obstetrical Anal Sphincter Injuries

- Estimated 4.0-6.6% of women delivering vaginally suffer obstetrical anal sphincter injuries (OASI)
- OASI = the tearing of anal sphincter muscles, and in some cases, the anal mucosa
- Despite high prevalence of OASI and associated negative outcomes, such as fecal incontinence, women are not receiving sufficient postpartum care
- Recognizing this gap and the fact that, from 2000-2005, 5.5% of vaginal deliveries at the Royal Alexandra Hospital (RAH) resulted in OASI, a team of physicians, physiotherapists, and nurse practitioners established a specialized perineal clinic for women with OASI in 2011

### Methods

- Searched peer reviewed literature on Medline
- Conducted interviews with staff and healthcare professionals at, and observed daily running of, the RAH perineal clinic
- Conducted medical chart review to assess the prevalence of OASI at the RAH in 2016
- Completed statistical analysis to examine potential risk factors for severity of OASI

### Purpose

1. To investigate the number and structure of specialized perineal clinics for women with OASI globally
2. To describe the structure and uptake of the RAH’s perineal clinic
3. To assess the prevalence of OASI at the RAH in 2016
4. To assess risk factors for severity of OASI

## Background

### Common Themes
- Impact of OASI on women’s short and long term physical and emotional health
- Need for more information and care to be provided to women with OASI (women often do not know exact nature of their OASI or its consequences)
- Need for education and training of healthcare providers on risk factors for, and diagnosis and treatment of, OASI
- Need for multidisciplinary specialist perineal clinics
- Need to gain awareness of and support for such clinics among obstetricians and nurses at the RAH

### Variables Assessed as Potential Risk Factors for 3rd vs 4th Degree OASI

<table>
<thead>
<tr>
<th>Not Statistically Significant</th>
<th>Not Significant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Duration of labour (min)</td>
<td>677.7</td>
</tr>
<tr>
<td>3rd deg</td>
<td>83.3</td>
</tr>
<tr>
<td>Pushing time (min)</td>
<td>636.0</td>
</tr>
<tr>
<td>4th deg</td>
<td>95.7</td>
</tr>
<tr>
<td>Prior OASI</td>
<td>Operative vaginal delivery</td>
</tr>
<tr>
<td>Chorioamnionitis</td>
<td>Gestational Diabetes</td>
</tr>
<tr>
<td>Parity</td>
<td>VBAC</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>Birthweight</td>
</tr>
<tr>
<td>Edtnicity</td>
<td>Ethnicity</td>
</tr>
</tbody>
</table>

### Next Steps

- Encourage the creation of, and reporting on, perineal clinics globally
- Increase awareness of the perineal clinic among obstetricians and nurses at the RAH to increase rates of referral
- Increase access to information about OASI and the clinic among women who have just experienced OASI

## Royal Alexandra Hospital

### Location
- Edmonton, Alberta, Canada

### Hours of Operation
- Daily

### Population Served
- Postpartum women with OASI

### Services Provided
- Physio-led education class on pelvic health
- Physio-led pelvic floor Pilates classes
- One-on-one physiotherapy appointment
- Appointments with other staff as needed

### Prevalence of OASI in 2016

- 326 (7%) OASI
- 4365 (91%) No OASI

<table>
<thead>
<tr>
<th>Proportion of OASI Cases Referred to Clinic</th>
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</thead>
<tbody>
<tr>
<td>326 (7%)</td>
</tr>
<tr>
<td>4365 (91%)</td>
</tr>
<tr>
<td>111 (3%)</td>
</tr>
<tr>
<td>215 (66%)</td>
</tr>
</tbody>
</table>

*Prevalence of OASI increased from 2000-2005, when 5.5% of vaginal deliveries at the RAH sustained OASI

## Acknowledgements

We would like to thank the staff at the RAH perineal clinic for their instrumental assistance and to recognize the generous support of a David & Beatrice Reidford Research Scholarship.