

SAFETY OF PERFORMING ELECTIVE CÆSARIAN SECTION WITHOUT INTRODUCING A URETHRAL CATHETER.

Hypothesis / aims of study

To determine the appropriateness of performing an elective cæserian section without urethral catheterization safely.

Study design, materials and methods

A prospective comparative study was conducted on 200 women undergoing elective cæserian section. Cases were divided into 2 groups. GROUP A includes 80 women undergoing elective cæserian section following the routine protocol of the department, using an indwelling urinary catheter before surgery. GROUP B comprises 120 women undergoing elective cæserian sections without urinary catheterization, voiding immediately before surgery.

Results

The mean volume of urine measured at the end of cæserian section in group A was 50 ml (range 25-120 ml). There was no significant increase in the rate of bladder injury. Similarly, there was no significant difference in the mean operating time in both groups.

Interpretation of results

The importance of this study lies in the fact that its results will affect the safety and comfort of a big number of patients. It has been known for long times that the dictum is that *the bladder should be catheterized in order to protect it from intra-operative injury*(1). The results of our study have revealed a number of other dicta. A slightly distended bladder have been found to be more easily identified during the step of surgery at which the peritoneum is entered. Contrary to the previous dictum, a bladder that is not drained but is not overtly full would therefore be less vulnerable to injury. While UTI is being recorded as the most common complication of cæsaerian sections (2), in rates ranging between 1.7% and 31.4%, an incidence that is directly related to bladder catheterization (3). In our study, only 2 cases developed UTI in group B. The best way to prevent UTI would therefore be to avoid catheterization.

Concluding message

The degree of filling of the bladder that occurs during cæserian section will neither increase the incidence of cystostomy or make the surgery more difficult. However, it will reduce the rate of post-operative UTI significantly. Cæserian section without bladder catheterization could be carried out safely provided that the women had recently voided the bladder.

References

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2. Chaudhuri P, Vengadasalam D. urinary infection following abdominal delivery-second thoughts on indwelling catheter. Singapore Med J 1983;24: 224-226
3. Tangtrakul S, Taechaiya S, Suthutvoravut S, Linasmita V. Post-cæserian section urinary tract infection: A comparison between intermittent and indwelling catheterization. J Med Assoc Thai 1994;77:244-248

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Is this a clinical trial?	No
What were the subjects in the study?	HUMAN
Was this study approved by an ethics committee?	Yes
Specify Name of Ethics Committee	Ethical committee - The General organization for Teaching Hospitals & Institutes
Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	Yes