

Impact of Episiotomy on Pelvic Floor Disorders and Their Influence on Women's Wellness After the Sixth Month Postpartum

Authors: Serena Bertozzi, Ambrogio P Londero, Arrigo Fruscalzo, Lorenza Driul, Cristina Delneri, Angelo Calcagno, Paolo Di Benedetto and Diego Marchesoni

Conclusions

On the basis of our results, we propose that, when carrying out randomized clinical trials to compare routine versus conservative episiotomy policies, any conclusions should be considered in the context of quality of health. Moving forward, it is important to standardize the classification of restrictive episiotomy policy. Defining precise indications would overcome the varying interpretations which are currently evident, where rates of episiotomy in conservative policy groups can range from as low as 7.6% up to 80%.^[18] A more complete understanding of the factors leading to perineal damage during delivery would enable the definition of a higher risk population, thus allowing a meaningful classification to be proposed. Finally, a point of key importance is standardization of episiotomy techniques. Such standards would not only enable comparisons between studies, but also maintain consistency between delivery managements.

In conclusion, our study reports an association between episiotomy and a low KHQ score, showing that those women who received an episiotomy and who present LUTS at the 12.79 months (± 3.3) follow-up postpartum have a higher quality of life.

Source: <http://www.biomedcentral.com/content/pdf/1472-6874-11-12.pdf>