Original Research Article

A hospital based study to evaluate surgical emergencies and procedures done among patients with obstetrical and gynecological problems

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Abstract

Introduction: The management of women presenting to the emergency department with obstetric or gynecologic complaints is an obvious and expected occurrence in everyday life in emergency. This study was carried out with an objective of evaluating the emergencies with obstetrical and gynecological problems. **Objective:** To evaluate the surgical emergencies and procedures done with obstetrical and gynecological problems. **Material and Methods:** A hospital-based descriptive study, carried out at a tertiary teaching hospital in district of from April 2013 till March 2014. A total of 376 women were included in the study who presented to the Obstetrics and Gynaecology emergency room at the hospital during the study period. Data was collected using semi-structured questionnaire, treatment records and intra-operative findings after taking consent. **Results:** The mean age of patients was 38.13 ±10.51 years. The majority of patients with emergency were multipara (71.54%) followed by primipara (20.74%). The most common presenting complaints was pain in abdomen in 283 (75.26%) and diagnosis as ectopic pregnancy. The majority of procedures were Salphingectomy among 105 (27.93%) patients. **Conclusion:** Hence, the study reveals that obstetrical and gynecological emergencies are common in tertiary care center.

Keywords: surgical emergencies.

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INTRODUCTION

The management of women presenting to the emergency department with obstetric or gynecologic complaints is an obvious and expected occurrence in everyday life in emergency. Most of the patients present with acute abdomen, abnormal vaginal bleeding or a combination of both. The developments of ultrasonographic imaging, serial biochemical pregnancy tests and minimal invasive surgery have given opportunity for early diagnosis and conservative treatment. Gynecologic disorders presenting with Acute Abdominopelvic Pain (AAP) may be benign and self-limiting or may negatively affect fertility capacity if not treated. The incidence is calculated

as 1.5% of office based visits and 5% of emergency department admissions. The delay in diagnosis and treatment may lead to worse outcomes.^{3,4} The sufferings of the patients in terms of morbidity, mortality and economy can be reduced to some extent by improving these shortcomings.⁵ The steadily increasing global rates of cesarean section have become one of the most debated topics in maternity care as its prevalence has increased alarmingly in the last few years.⁶ Cesarean section is a major surgical procedure with a corresponding level of risk and should be performed in the presence of specific and clearly defined indications while some of the obstetricians consider it to be quite simple, efficient, safe and psychologically well-tolerated procedure and far superior to secondary interventions such as vacuum delivery or emergency cesarean section.⁷ This study was carried out with an objective of evaluating the emergencies and obstetrical and gynaecological problems presenting as acute surgical emergencies at a tertiary care hospital.

OBJECTIVE

To evaluate the surgical emergencies and procedures done with obstetrical and gynecological problems.

METHODOLOGY

The present study was a hospital-based descriptive study, carried out at a tertiary teaching hospital in district of from April 2013 till March 2014. A total of 376 women were included in the study selected by consecutive method of non-probability sampling technique among the patients who presented to the Obstetrics and Gynaecology emergency room at the hospital during the study period. All cases requiring surgical intervention were included in the study. Cases requiring conservative management were excluded. Immediate resuscitation followed by detailed history taking, physical examinations, lab investigations including ultrasonography for diagnosis and appropriate management were done as per the existing protocol for all patients. Data was collected using semi-structured questionnaire, treatment records and intra-operative findings after taking consent from the patient's closest visitor. This study was conducted after taking ethical clearance from the Institute Ethical Review Board.

RESULTS

Table 1: Demographic profile among patients

Vari	iable	No. of Patients (n=376)	Percentage
	≤20	86	22.87
Age	21-30	184	48.94
	31-40	75	19.95
	≥41	31	08.24
Litoracy	Educated	293	77.92
Literacy	Uneducated	83	22.08
Packground	Urban	64	17.02
Background	Rural	312	82.98
Parity	Multipara	269	71.54
	Primipara	78	20.74
	Nullipara	29	07.72

In the study, majority of patients were in age group 21-30 years (48.94%) The mean age of patients was 38.13 ± 10.51 years. The literacy among patients showed that 22.08% were uneducated and 82.98% patients were from rural area. The majority of patients with emergency were multipara (71.54%) followed by primipara (20.74%).

Table 2: Presenting Complaints of Patients at admission:*

Complaint	No. of Patients (n=376)	Percentage
Pain abdomen	283	75.26
Bleeding per vagina	78	20.74
Vomiting	37	09.84
Loss of Consiousness	29	07.71
Abdominal distension	24	06.38
Mass per abdomen	11	02.92
Fever	07	01.86
Other#	45	11.96

(*Multiple response present; # Others include hemoperitoneum, shock, chest pain etc.)

The most common presenting complaints was pain in abdomen in 283 (75.26%) of the patients followed by

bleeding per vagina among 78 (20.74%) of the patients and vomiting among 37 (09.84%) of the patients. (Table 2)

Table 3: Diagnosis of patients at Emergency admission
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Cause	No. of Patients	Percentage
Ectopic Pregnancy	192	51.06
Ovarian Mass/cyst	52	13.83
Ruptured ovarian cyst	47	12.50
Post LSCS/Hysterectomy	32	08.51
PPH	27	07.18
Ruptured uterus	22	05.86
Hydatidi form Mole	04	01.06
Total	376	100

Out of 376 patients a total of 192 (51.06%) of the patients were diagnosed with ectopic pregnancy followed by ovarian mass 52 (13.83%) (Table 3).

Table 4: Procedures performed on patients at Emergency

Procedure	Frequency	Percentage
Salphingectomy	157	41.76
Vaginal Hysterectomy (VH)	105	27.93
Total Abdominal Hysterectomy (TAH)	83	22.07
VH/TAH + Bilateral Salphingo- ooherectomy	21	05.59
Repair of Uterus	10	02.65
Total	376	100

A total of 157 (41.76%) underwent Salphingectomy and 105 (27.93%) were treated with Vaginal Hysterectomy (VH). Total Abdominal Hysterectomy was performed among 83 (22.07%) patients. (Table 3).

DISCUSSION

The present study was a hospital-based descriptive study. carried out at a tertiary care teaching hospital. A total of 376 women were included in the study. In the study, majority of patients were in age group 21-30 years. (48.94%) The mean age of participants was 38.13 ± 10.51 years, similar to the study in Kasur, Pakistan, and different from another study in Lahore, Pakistan where all the patients were in the category of 15 to 35 years. 5,8 The most common presenting complaints was pain in abdomen in 283 (75.26%) of the patients followed by bleeding per vagina among 78 (20.74%) of the patients and vomiting among 37 (09.84%) of the patients. Similar findings were observed in a study at Turkey that abdomino pelvic pain (59%) was the most common complaint followed by vaginal bleeding (41%). In the present study, out of 376 patients a total of 192 (51.06%) of the patients were diagnosed with ectopic pregnancy followed by ovarian mass 52 (13.83%). Similarly, a study done by Poonam et al¹⁰ showed a total of 143 cases of ruptured ectopic pregnancy admitted at hospital for

emergency. The number of ectopic pregnancy in this study is higher in comparison with 143 cases seen in five years in a study done by Poonam *et al.*¹⁰ The findings related to diagnosis was also comparable with the findings in a teaching hospital in Nigeria, where ectopic pregnancy was the commonest indication for surgery. Another study in Nairobi, Kenya also showed that ectopic pregnancy was the most common cause for emergency laparotomy among women. A total of 157 (41.76%) underwent Salphingectomy and 105 (27.93%) were treated with Vaginal Hysterectomy (VH). Total Abdominal Hysterectomy was performed among 83 (22.07%) patients. Smilar findings were seen in study by Hanoon P Pokharel *et al*¹³ where major procedures done in emergency were Salphingectomy.

CONCLUSION

This study reveals that obstetrical and gynecological emergencies are common in tertiary care center and at the same time it can be observed that some of them could have been avoided with minimal precautions, counseling and pre conceptual care in time.

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