

Bridging the Gap between Obstetric and Colorectal Services after Obstetric Anal Sphincter Injuries

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Abstract : Purpose: The primary aim of this study was to determine the prevalence of pelvic dysfunction symptoms following OASI. The secondary aim was to assess the scope of a dedicated perineal trauma clinic in identifying and investigating women that have experienced faecal incontinence after OASI and if a transitional clinic arrangement to colorectal surgeons would be useful. Methods: The clinical database was used to identify and obtain information about 118 women who sustained an OASI (3rd/ 4th degree tear) between August 2016 and July 2017. A questionnaire was designed to assess symptoms of pelvic dysfunction; this was sent via the post in November 2018. Results: The questionnaire was completed by 45 women (38%). Faecal incontinence was experienced by 42% (N=19), flatus incontinence by 47% (N=21), urinary incontinence by 76% (N=34), dyspareunia by 49% (N=22) and pelvic pain by 33% (N=15). Of the questionnaire respondents, only 62% (N=28) had attended a perineal trauma clinic appointment. 46% (N=13) of these women reported having experienced difficulty controlling flatus or faeces in the questionnaire, however, only 23% (N=3) of these reported ongoing symptoms at the time of clinic attendance and underwent an endoanal ultrasound scan. Conclusion: Pelvic dysfunction symptoms are highly prevalent following an OASI. Perineal trauma clinic attendance alone is not sufficient for identification and follow up of symptoms. Transitional care is needed between obstetric and colorectal teams, to recognize and treat women with ongoing faecal incontinence.

Keywords : incontinence, obstetric anal sphincter, injury, repair

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