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Analiza czynników ryzyka nieprawidłowego gojenia rany krocza po porodzie drogami natury

Analysis of Risk Factors for Impaired Perineal Wound Healing After Vaginal Delivery

Słowa kluczowe: poród, urazy krocza, gojenie ran

Keywords: childbirth, perineal trauma, wound healing

Abstract

Introduction. Childbirth should be considered from multiple perspectives, including psychological, emotional, medical, and economic aspects. From a medical standpoint, impaired perineal wound healing following vaginal delivery is a significant factor affecting the well-being of women and their families postpartum. The complexity of factors that may disrupt proper wound healing necessitated the present study.

Materials and Methods. This study was conducted through a retrospective analysis of electronic medical records of patients receiving healthcare at the "Żelazna" Medical Center, St. Sophia Hospital and Outpatient Clinic. The facility is a third-level reference centre and at the same time serves the largest number of deliveries in Poland. The analysis covered the period from January 1, 2017, to December 31, 2022, during which a total of n=38,204 hospital admissions for childbirth were recorded, with vaginal deliveries accounting for 68.07% (n=26,004).

From this cohort, a study group was identified, comprising 119 women who experienced impaired perineal wound healing after vaginal delivery. A control group was selected from the database in a 2:1 ratio to the study group using propensity score matching. Control group patients were matched based on age, gestational age at delivery, and parity.

Data retrieved from medical records were compiled into a database using Microsoft Excel from the MS Office 2010 suite for Windows 10. Statistical analysis was performed using "R Studio" with the R programming language.

Results. Based on statistical analysis, significant risk factors for impaired perineal wound healing after vaginal delivery were identified. These factors included operative vaginal delivery, increased intrapartum blood loss, neonatal birth weight, prolonged hospitalization, and season of delivery, specifically spring and summer.