Is “Shoulder first technique” a safe alternative to deliver deeply wedged fetal head during cesarean section?

Cesarean section is the most common obstetric operation. The incidence of cesarean section varies world wide. As per World Health Organization (WHO) ideal rate of C-section should not exceed 10-15 per cent, but it's far more than this especially in developing countries.

Caesarean section in second stage of labour accounts for one-fourth of all primary caesarean sections especially in tertiary care hospitals in India where the laboring women are transferred once they fail to deliver vaginally.

The second stage cesarean section with impacted foetal heads are technically difficult and are associated with high rate of maternal and foetal morbidities.

Different techniques have been used for decades to extract fetal head in late second stage of labor to reduce the maternal complications like extension of uterine incision, hemorrhage and fetal morbidities. A prospective study was conducted over a period of two years in tertiary care hospital to evaluate the efficacy of shoulder first technique in women undergoing cesarean section in second stage of labor for any maternal/fetal indication and this technique was compared with the other methods of fetal head delivery in late second stage of labor. At the end of study the observation was that with the shoulder first technique the maternal and fetal complications were very less. The details of the study will be discussed at the time of presentation in the congress.

Biography

PushpaDahiya, completed her masters in obstetrics and gynecology from a premiere institute in India. She is working in a tertiary care hospital and a post graduate teaching institute; with a teaching experience of 25 years. She guided 15 post graduate students in National university of Oman and contributed more than 100 publications in various national and International journals.

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