

Caesarean Section Without Indwelling Catheter

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Abstract

Background: Many studies were conducted worldwide on the subject but there is none in Chittagong. To get our experience we had conducted the study. **Methods:** It was an experimental study. 70 cases were conveniently selected under certain inclusion and exclusion criteria. Cases were managed by the obstetricians unrelated to the study. All cases were meticulously observed by the investigators and findings were instantly recorded. All data were manually managed. A discussion was made and conclusion was drawn. **Results:** Total 70 cases were studied. 35 primae and 35 multipara. Mean age was 27 years +2.3 . All were literate and 86% were housewives. Cases were without medical, surgical complications and were uneventfully managed. First voiding time was 4.28 hours +0.45. 07% cases were evacuated with plain catheter after 7 hours for pain and bladder distention. Average hospital stay 2.3 days. There was no occurrence of urinary tract infection. **Conclusion:** Indwelling catheter should not be used unless it is strongly indicated.

Key words: LSCS; Indwelling catheter; Complications.

INTRODUCTION

Use of indwelling catheter in caesarean section is a routine practice. This is for better per operative exposure and to prevent post operative urinary retention but this indwelling catheter causes discomfort and urinary tract infection. It also prolongs hospital stay which costs more and there is more chance of nosocomial infection¹. Avoiding indwelling catheter all problems could be avoided but this needs pre operative bladder evacuation, careful per-operative check up and post operative follow up. Urine analysis, culture sensitivity were done for all cases to detect urinary tract infection.

MATERIALS AND METHODS

01. Study title	Caesarean section without indwelling catheter
02. Study type	Experimental study
03. Sampling technique	Convenient sampling
04. Sampling size	70(considering resource constraints)
05. Inclusion, exclusion criteria	LSCS indicated but free from complications
06. Study area	Chattagram Maa-O-Shishu Hospital Medical College
07. Study period	January-March, 2014
08. Ethical implication	Informed written consent from patient was taken
09. Data management.	Manual management
10. Statistical analysis	Z test was used

RESULTS

Total 70 cases were studied. 35 primae and 35 multipara. Mean age was 27 years +/- 2.3. All were literate and 86% were housewives. Cases were without medical, surgical complications and were uneventfully managed. First voiding time was 4.28 hours +0.45. Four cases (5.7%) were evacuated with plain catheter only for one time after 7 hours of delivery for pain and bladder distention. Average hospital stays 2.3 days. There was no occurrence of injury and urinary tract infection.

Table 1: Post operative urinary bladder evacuation

Bladder evacuation	No. of cases(%)
Without catheter	66(94.3%)
With plain catheter	04(05.7%)
Total	70(100%)

DISCUSSION

Indwelling catheter is harmful. It causes urinary tract infection at different magnitude and health hazards depending on duration of catheterization. Moreover, it causes enormous discomfort and may cause injury to urethra. Aforesaid problems

are preventable by avoiding indwelling catheter. Present study shows 5.7% cases needed plain catheterization only for one time 7 hours after caesarean section. Study conducted by them in 2001 also showed 5% cases had needed catheterization². Both the studies showed no occurrence of urinary tract infection. Another study showed 4.4% cases were evacuated with plain catheter during post operative period³. Urinary tract infection didn't occur in this study. First voiding time and average time of hospital are also similar. The findings are consistent with one another (P>.05). Besides health hazards catheterization also increases hospital bill.

CONCLUSION

Catheterization causes discomfort and health hazards. It increases hospital bill volume even without complications. So, catheterization should be avoided unless there is clean cut indication.

DISCLOSURE

All the authors declared no competing interest.

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