



REDUCTION OF LSCS RATE IN NULLIPAROUS WOMEN WITH A TERM, SINGLETON BABY

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ABSTRACT

Constantly increasing rates of LSCS/Caesarean Rates has been a problem globally as well as in India. Many guidelines have been launched globally with an Aim to Reduce the rates of LSCS; With a similar Ambition Max Healthcare had started with the Clinical Audit on LSCS. Regular Meetings were conducted on The Central as well as Unit Level for discussions on increasing rates of LSCS.

INTRODUCTION

Worldwide, caesarean section rates have been steadily increasing, without significant benefit to the health of women or their babies. Caesarean birth is associated with short- and long-term risks that can extend many years beyond the current delivery and affect the health of the woman, child and future pregnancies.

As the Pareto Principle states that 80% of the problems are due to 20% of the causes, our Endeavour is to focus and curb these 20% reasons to reduce our rates of LSCS rates.

METHODS AND MATERIALS

It is a retrospective and ongoing study. Retrospectively the data from April 2017 was collated and analysis of the data was done to find the most common reasons for LSCS. Pareto Analysis and Six Sigma approach were used to keep our efforts focused towards the most common problems faced in such cases.

RESULTS

The analysis of % of C-section rate data from April 2017 till Dec 2019 in Nulliparous women with a term, singleton baby in a vertex position delivered by caesarean section ≥ 37 weeks of gestation completed; reveals a continuous downwards trends and a very favorable trend line. The Rate of C sections in April 2017 was as high as 82% which shows a very favourable downwards trends bringing down the rates to as low as Zero Percent in one of the months after the initiation of this drive.

DISCUSSION

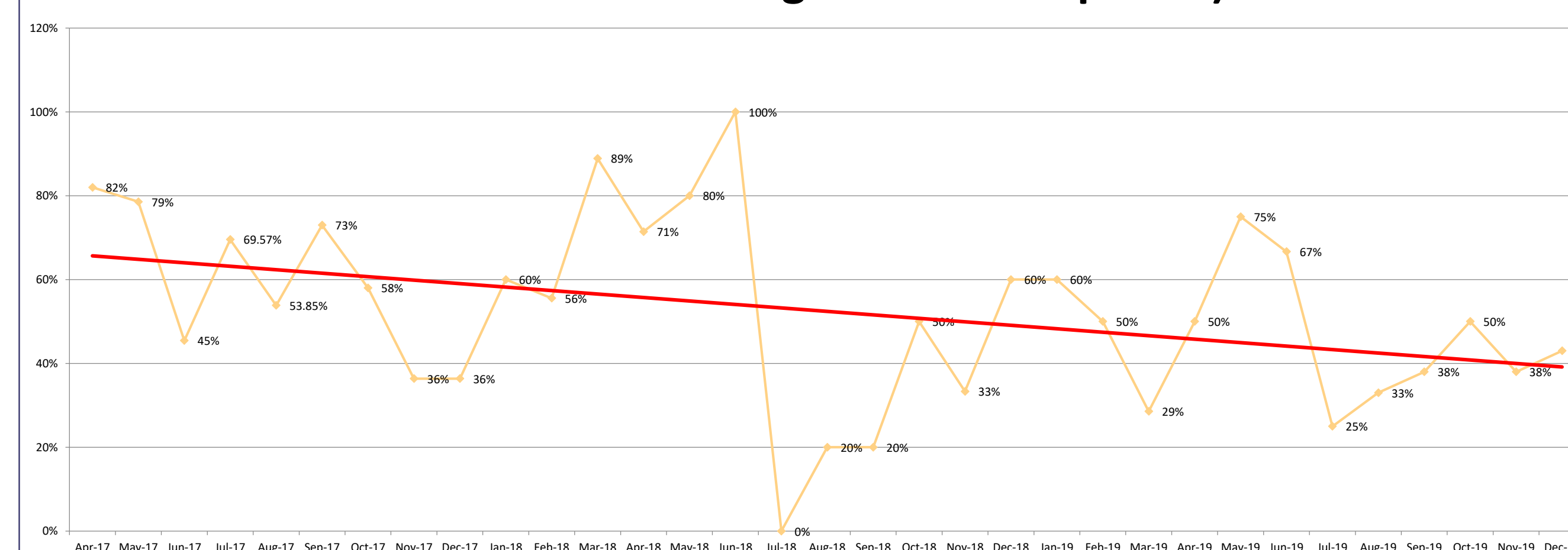
Steps Taken In Reducing the LSCS Rates: One on one Management based review with the Consultants on the rising trends of LSCS in Primary Gravidas All Doctors were kept posted on the rates of LSCS for them and the rest of the team keeping the names of other doctors as confidential. LSCS rates has been added as an essential parameter for Appraisal of physicians.

CONCLUSIONS

Just by regular monitoring and feedback system the LSCS rates were brought down Significantly hence improving Maternal and Child Safety at the time of Birth.

GRAPHS AND TABLES

% of C-section rate in Nulliparous women with a term, singleton baby in a vertex position delivered by caesarean section ≥ 37 weeks of gestation completed) NA



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