

What are the predictors for the severity of obstetrics anal sphincter injuries? A preliminary report with binary and multinomial logistic regression analyses

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ABSTRACT

Introduction: Obstetric anal sphincter injuries (OASIS) complicate around 1-2% of deliveries in low- and middle-income countries. Asians are twice more likely to suffer this complication. 3rd and 4th degree perineal tears that involve the internal anal sphincter muscle and the anal mucosa have been reported to have a poorer outcome and higher risk of recurrence compared to less severe tears. This study aims to establish the risk factors that may be used to predict the severity of OASIS. **Methodology:** A retrospective 10-year analysis for 3rd and 4th degree perineal tears in a tertiary centre. Maternal, and neonatal factors were examined and compared for each grade of OASIS. **Results:** 520 patients with OASIS were included into the study. From our multinomial logistic regression analysis, the birthweight of ≥ 3.5 kg had an increased risk for fourth degree perineal tears compared to the grades 3a (OR 8.29, 95% CI 1.88-36.67, p-value 0.005), 3b (OR 12.89, 95% CI 3.17-52.45, p-value <0.001), and 3c (OR 7.38, 95% CI 1.62-33.66, p-value 0.01) perineal tears. There was no significant association showing increased risk for 4th degree tear from instrumental deliveries, the use of epidural analgesia, prolong labour, shoulder dystocia, diabetes in pregnancy and maternal height. **Conclusion:** The neonatal birthweight (≥ 3.5 kg) was the most significant factor in predicting the incidence of 4th degree perineal tear in OASIS for this study population. This predictor should therefore be used in combination with other established risk factors for predicting the incidence of 4th degree perineal tears in vaginal deliveries.

Squamous cell carcinoma from mature cystic ovarian teratoma in a young patient: A rare transformation

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ABSTRACT

Introduction: Malignant transformation of mature cystic ovarian teratoma (MCTO) is rare (3%) with most common transformation of squamous cell carcinoma (SCC) – 80%. It normally occurs at older age. We report a case of SCC arising from MCTO in a 31-year-old lady. **Case Description:** Patient presented with complained of abdominal pain and distension for 3 months. Abdominal examination showed presence of cystic mass correspond to 24 weeks size of gravid uterus. Ultrasound and CT performed showed a complex solid-cystic pelvic mass suggestive of ovarian teratoma. She underwent laparotomy and right salphingo-oophorectomy with intraoperative findings of a twisted ovarian cyst measuring 20 cm x 20 cm, fat and hair components seen within the cyst content. Histopathology examination reported a well-differentiated squamous cell carcinoma in the background of a MCTO. She completed 6 cycles of chemotherapy (carboplatin/paclitaxel). PET scan done after chemotherapy showed disease progression with bowel involvement. **Discussion:** Malignant transformation of MCTO can occur in young patient with known poor prognostic outcome.