

## Introduction

- Faecal incontinence following OASIS (obstetric anal sphincter injuries) is generally an understudied condition
- Aim of this research is to look at the OASIS in all their aspects and repercussions

## Methods

- The research is divided in 5 chapters
- Chapter 1 is a systematic review of published articles about risk factors for OASIS and incidence of OASIS following use of instrumentation
- Chapter 2 is a survey of colleges and associations around the world on the use of instrumentation, incidence of OASIS and rate of caesarean sections registered in each country
- Chapter 3 is a qualitative study via questionnaires and semi-structured interviews on the effects of incontinence following OASIS in life of women
- Chapter 4 is a retrospective and prospective study on how the consent process for using instrumentation is delivered
- Chapter 5 is a retrospective analysis on anorectal physiology testing and endoanal ultrasound results on women with incontinence from 1997 to 2021

## Results

- Chapter 1: Systematic review of 588 full text selected studies: primiparity resulted one of the main risk factors for OASIS in 79 articles. The median incidence of OASIS in primipara: 7.51%. Within the 73 articles that have a specific group of primipara the main risk factors for OASIS are: birthweight of the child >3,5Kg; instrumental assisted vaginal delivery (vacuum or forceps or sequential use), 2nd stage of labour >120 minutes; occipito-posterior presentation of the foetus head, head circumference of the foetus >35 cm; gestational age >40 weeks; Asian ethnicity of the mother. The main protective factors for OASIS: use of mediolateral episiotomy during both vacuum and forceps deliveries; regular strenuous exercise ; hands on the infant head
- Chapter 2: Twenty-three colleges replied to the survey, guidelines (local, national or international) provided for use of instrumentation. Countries with the highest rates of elective csection have lowest incidence of OASIS
- Chapter 3: 16 women recruited from the St Mark's site, 15 from the second recruitment centre at Cardiff and Vale UHB. The changes in life of women who had OASIS impact on their career and aims in life

## Results continued

- Chapter 4: 96(83%) of the participant pregnant women were not informed about possible use of instrumentation at childbirth, 7(6%) only knows that it is used if needed, 11(9%) were told it is used to help baby coming out, 3(2%) knows from personal experience and 1 (0,9%) is aware of risk of tear. Consent for instrumentation was taken during labour, just before use of these. For 6/59 (10.2%) there was no consent documented or present in notes. 46/59 (78%) had opioids before use instrumentation and if consented were under the effects of these
- Chapter 5: currently completing database

## Conclusions

Primiparity is one of the main risk factors for OASIS and cannot be avoided while some of the risk factors (use of instrumentation) could be potentially modified or avoided to reduce the incidence of OASIS. The information about the use of instrumentation that women gain during their pregnancy is very limited. Improving the level of information can offer a better informed choice about childbirth.