Obstetrical anal sphincter laceration and anal incontinence 5-10 years after childbirth

Emily C. Evers, MPH; Joan L. Blomquist, MD; Kelly C. McDermott, BS; Victoria L. Handa, MD, MHS

SUMMARY: At the time of a vaginal delivery, some women have an episiotomy (a cut made to allow more room for delivery of the baby) and some women have a spontaneous tear. In a certain number of cases, the episiotomy or tear extends into the anus. This is called an 'anal sphincter laceration'. This research focused on whether problems with bowel control and bowel function were more common for women who had an anal sphincter laceration

We included 937 of our participants in this analysis: 90 women with a history of an anal sphincter laceration, 320 women with a history of a vaginal delivery, but no sphincter laceration (vaginal control), and 527 women who delivered by cesarean section only (cesarean control). Women with an anal sphincter laceration were more likely to report symptoms of anal incontinence:

Symptom	Sphincter Tear	Vaginal Control	Cesarean Control
			Control
Anal Incontinence	19%	10%	9%

In addition, we asked women who have anal incontinence to tell us how much their symptoms affect their quality of life. We found that women with a history of a sphincter tear were more likely to be bothered by their anal incontinence symptoms. Specifically, their symptoms were more likely to interfere with their ability to do household chores, physical recreation, entertainment activities, travel by car or bus more than 30 m inutes from home, and participate in social activities.

The published article can be found at

http://www.hopkinsmedicine.org/johns_hopkins_bayview/_docs/medical_services/obstetrics_gynecolo gy/research/MOAD/AnalSphincterLacerations_FullText.pdf