

Retrospective Study on Relaparotomy Cases in the Department of Obstetrics and Gynaecology at a Tertiary Care Hospital in South India

Rachitha. M. Prasad

Bachelor of Medicine and Bachelor of Surgery Department of Obstetrics and Gynaecology, Karnataka Institute of Medical Sciences, Hubli Rajiv Gandhi University of Health Sciences

Madhu Jadaiswamy

Department of Obstetrics and Gynaecology, Karnataka Institute of Medical Sciences, Hubli Rajiv Gandhi University of Health Sciences

Abstract:

Introduction: Laparotomy done within 60 days of primary surgery for the original disease is called Relaparotomy. It is a very difficult decision requiring good clinical judgment and is critical for the patient to undergo second surgery within short span of time.

Objectives: Objective of the study was to determine incidence of relaparotomy, its indications, management and outcome.

Materials and Methods: It is a retrospective study for the duration of 2 years. Laparotomies that were done within 60 days of primary surgery for the sake of complications of the primary surgery, were included in the study. Data was analysed with respect to clinical presentation, pre-operative investigations, indication, procedure undertaken, intra-operative and post-operative complications and outcome.

Results: Incidence of relaparotomy was 0.26%. Indications of relaparotomy included internal haemorrhage in 11 cases (39.2%), postpartum haemorrhage in 10 cases (35.7%), pyoperitoneum in 5 cases, bowel perforation in 1 case (3.5%) and burst abdomen in 1 case (3.5%). Most common procedure performed was subtotal abdominal hysterectomy -13 cases (46.4%). Various complications were observed such as requirement of mechanical ventilation, sepsis, DIC, peripartum cardiomyopathy, pneumonia, AKI, MODS.

Conclusion: Emergency relaparotomy is a life-saving procedure. Timely diagnosis and intervention with relaparotomy in the indicated cases is the need of the hour.