

**ANALYSIS OF 772 CASES OF CAESAREAN SECTIONS
(In Government Raja Sir Ramaswamy Mudaliar's Lying-In
Hospital, Madras-13 for the Years 1960 To 1963 October)**

by

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Incidence

There was a total number of 38,581 deliveries for the years 1960 to 1963 (October) and 772 caesarean sections were done, giving an overall incidence of 2.1%. Table I shows the

TABLE I

Year	Total number of deliveries	Caesarean Section	Percentage
1960	9758	186	2.2%
1961	9758	177	1.92%
1962	10191	210	2.05%
1963 (upto October)	8874	199	2.24%

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incidence of caesarean sections for the past 3 years.

Type of Casarean Section

Of the 772 caesarean sections, 723 cases were lower segment operations 41 classical and 8 caesarean hysterectomies, giving an overall incidence of 93.65% lower segment caesareans, 5.55% classical and 1.08% caesarean hysterectomy.

Age

Table II shows the age distribution of the patients subjected to caesarean sections.

TABLE II

	15 to 20 years	20 to 30 years	Above 30 years
Total Number	89	549	126
Percentage	11.53%	75.77%	16.61%

It is seen from the above that the highest incidence falls in the age group 20 to 30 years.

Parity

Table III gives the distribution of the caesarean sections rate according to parity.

TABLE III

	I	II	III	IV	V and Above
Total number	194	154	109	90	224
Percentage	25.1%	19.54%	14.11%	11.67%	29%

It is seen from the above that the incidence of caesarean section is highest in the grand multi-para and primipara.

Indications

The classification of the indications for caesarean section becomes difficult because of the variety and multiplicity of indications.

Table IV gives the indications for lower segment caesarean section.

TABLE IV

Indications	No. of cases	Percentage
1. Pelvic contractions and C.P.D. ..	235	25.26
2. Abnormal uterine action	83	11.09
3. A.P.H. 1. Accidental haemorrhage	11	1.42
2. Placenta previa	33	4.66
4. Unengaged head with foetal distress	69	8.94
5. Malpresentations ..	129	16.67
6. Miscellaneous ..	70	9.03

Sterilization—Out of the 772 cases, 134 were sterilized, giving an incidence of 17.35%.

Classical Caesarean Section:— Indications

The following were the indications for classical caesarean sections.

TABLE V

Indications	Number
1. Previous caesarean section with C.P.D.	49
2. Miscellaneous	25

It is seen from the above that the majority of classical caesarean sections were performed as repeat sections, the adhesions and scar tissue of the previous operations preventing a lower segment caesarean section being performed.

Of the 41 classical caesarean sections 24 cases were sterilized, giving an incidence of 58.7%. The rest of the cases were not sterilized, either because the patients were not willing or because they had no other living children. They are particularly instructed to come for a periodical checkup.

There were 8 cases of caesarean hysterectomies: The following were the indications:

TABLE VI

Indications	Number of cases
1. Multiple fibroids and previous caesarean section	1
2. Concealed accidental haemorrhage	4
3. I.P. sepsis and physometra ..	1
4. Cancer breast complicating pregnancy	1
5. Hypertonic uterine action ..	1

Repeat Caesarean Sections

Of the total number of caesarean sections performed there were 91 cases of repeat caesarean sections, giving an incidence of 11.8%.

Elderly Primipara

There were 26 cases of elderly primipara, giving an incidence of 3.36%. In these the following were the indications:

1. Uterine inertia	9
2. Toxaemia	5
3. Unengaged head with foetal distress	4
4. Breech	3
5. C.P.D.	3
6. Maternal distress	1
7. Cord prolapse	1

Analysis of Maternal and Perinatal Mortality

Table VII shows the maternal mortality and the uncorrected perinatal mortality.

TABLE VII

Year	Maternal mortality	Percentage	Perinatal mortality	Percentage	Corrected perinatal mortality	Percentage
1969	2	1.07%	17	9.14%	9	4.84%
1961	6	3.39%	21	12.43%	11	6.2%
1962	3	3.8%	13	6.18%	8	3.8%
1963	1	0.05%	21	10.5%	15	7.5%

The overall maternal mortality was 2.2% and uncorrected perinatal mortality 9.2%. The corrected perinatal mortality was 5.6%.

Analysis of the causes of maternal and perinatal mortality.

Causes of Maternal Death:

1. Pulmonary Oedema	4
2. Peritonitis	2
3. Atonic P.P.H.	3
4. I.P. Sepsis with hyperpyrexia	1
5. Intestinal Obstruction	1
6. T.B. Abdomen with intestinal obstruction	1
7. Post-operative shock	4
8. Puerperal mania with acute cardiac failure	1

(b) Causes of uncorrected Perinatal Mortality:

Placenta Previa	12
Accidental Haemorrhage	8
Congenital malformation	3
Toxaemia	2
Prematurity	10
I.P. Sepsis with septicaemia	2
Respiratory infection	8
Umbilical sepsis	1
Asphyxia probably due to prolonged labour, failed versions and failed forceps	24
Pre-diabetic state	1

In some of the above cases post-mortem was done to ascertain the cause of death. In other cases the cause of death was ascertained by clinical examination and hence is subject to error.

Finally it may be said that timely decision to do caesarean section, more liberal use of epidural and local anaesthesia, and proper attention to the fluid and electrolyte imbalance of the patient will help to reduce the perinatal and maternal mortality.