

Comparing emergency and planned peripartum hysterectomy in a tertiary centre

Jagdeesh Kaur¹, Nor Aini Mohamad¹, Mohd Fairudzi Afzanizam Salleh¹, Kamarul Azhar Kamaruddin¹, Yusmadi Abdullah¹, Noraslawati Razak², Malina Osman³, Roziana Ramli¹

¹Department of Obstetrics & Gynaecology, Hospital Sultanah Nur Zahirah, Kuala Terengganu, ²Department of Anaesthesiology, Hospital Sultanah Nur Zahirah, Kuala Terengganu, ³Department of Community Health, Faculty of Medicine and Health Sciences, Universiti Putra Malaysia, Kuala Lumpur

ABSTRACT

Introduction: Our study was aimed to evaluate the incidence, risk factors and to compare the indications, outcomes, and complications between peripartum emergency hysterectomy (EH) and peripartum planned hysterectomy (PH). **Methods:** A retrospective cross-sectional study was conducted over a 6-year period, from 1 January 2016, to 31 December 2021. All cases of peripartum hysterectomy were included. Data including patient characteristics, peri-operative complications, and maternal/neonatal outcomes were analyzed and compared between the two groups. **Results:** Of the 100,567 deliveries, 65 cases of peripartum hysterectomy were identified, yielding a prevalence rate of 0.06%. The majority of patients were multiparous (96.9%) with a history of previous caesarean section (73.8%) or diagnosed with placenta previa (75.4%). More than half of the patients (61.5%) had both previous caesarean scar and concomitant placenta previa. Emergency hysterectomy (EH) was performed in 60% of the patients, while 40% underwent planned hysterectomy (PH). Abnormal placentation was the sole indication for PH (100%), whereas postpartum haemorrhage resulting from abnormal placentation was the most common indication for EH (53.8%). Patients who underwent EH were more likely to experience massive blood loss and require ICU admission compared to patients with PH. In the EH group, non-placental causes of EH required significantly more red blood cell transfusion than placental causes. Complication rates indicated more cases of postoperative fever and re-laparotomy in the EH group (18.4% vs. 7.6%), while urinary tract injuries were exclusive to the PH group (9.4% vs. 0%). **Conclusion:** Patients who underwent emergency hysterectomy demonstrated higher risks and complications, compared to those with planned hysterectomy.

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Factors associated with the knowledge of COVID-19 and perception of vaccination among pregnant women in Hospital Tunku Azizah, Kuala Lumpur

Nur Aizati Athirah Daud¹, Wu Jie Wen¹, Pavithira A/P Subramaniam²

¹Discipline of Clinical Pharmacy, School of Pharmaceutical Sciences, Universiti Sains Malaysia, USM, Penang, Malaysia, ²Pharmacy Department, Hospital Tunku Azizah, Kuala Lumpur

ABSTRACT

Introduction: Pregnant women were at a higher risk during the pandemic. Understanding their knowledge of the infection risk can influence their medication use and perception of the COVID-19 vaccine's safety and effectiveness. Our study was aimed to determine the perception and health concerns related to COVID-19 among pregnant women including infection risk and vaccination during pregnancy. **Methods:** A questionnaire-based, cross-sectional study was conducted with pregnant women aged 18 years and older, attending the Obstetrics & Gynaecology (O&G) clinic in Hospital Tunku Azizah, Kuala Lumpur. The questionnaire covered pregnancy status, demographics, perception of the risk of COVID-19 infection during pregnancy, and perception of COVID-19 vaccination. Pearson Chi-Square test and univariate logistic regression were performed to determine the factors associated with adequate knowledge and good practice. **Results:** The study involved 349 participants, with an average age of 32.1 years. Pregnant women with lower education levels (diploma or lower) were less likely to have a satisfactory level of COVID-19 knowledge (odds ratio, OR 0.63, 95% CI 0.4-0.99, p=0.04). Pregnant women with a satisfactory knowledge of infection risk were also more likely to believe in the effectiveness (OR: 3.12, 95% CI 1.98-4.9, p<0.001) and safety (OR: 2.1, 95% CI 1.34-3.3, p=0.002) of COVID-19 vaccination during pregnancy. **Conclusion:** The study highlights a significant association between pregnant women's education level, knowledge of COVID-19 infection risk, and perception regarding the effectiveness and safety of COVID-19 vaccines. Enhancing knowledge among pregnant women can positively impact their health-related decisions during the pandemic, including medication use and vaccine acceptance.