

Outcomes of Routine Episiotomy: A Systematic Review

Hartmann, K., **Viswanathan, M.**, Palmieri, R., Gartlehner, G., Thorp, J., and **Lohr, K.N.** 2005. Outcomes of routine episiotomy: A systematic review. *Journal of the American Medical Association*, 293 (17): 2141-2148.

The practice of episiotomy, an incision to enlarge the vaginal opening during childbirth, is often justified as a means of avoiding harms such as urinary incontinence, fecal incontinence, and sexual dysfunction associated with a natural tear of the vagina during delivery. Episiotomy is an extremely common surgical procedure experienced by women. In the United States, as many as one-third of women delivering vaginally have experienced an episiotomy.



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Our study found no evidence of benefit resulting from the routine practice of episiotomy. In fact, outcomes with episiotomy can be considered worse, particularly over the long run, because some proportion of women who would have had lesser injury instead had a surgical incision.

The findings reported in the paper have the potential to significantly alter routine care for all pregnant women who deliver vaginally through changes in professional practice and consumer awareness. The American College of Obstetricians and Gynecologists (ACOG) released new guidelines for health care providers in April 2006 based on this review. Additionally, the widespread dissemination of these findings in national and international media, including outlets such as the AP Wire Services, *Washington Post*, National Public Radio, and *People* magazine, has raised public awareness. These results are routinely reported as the evidence base for consumer guidelines (e.g., <http://www.cigna.com/healthinfo/zx1648.html>).

Link: <http://jama.ama-assn.org/cgi/content/full/293/17/2141>