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**An early point evaluation of the perineal protection bundle**.

Between 2010 -2015, Australian rates of third- and fourth-degree tears, or obstetric anal sphincter injuries (OASI) for both instrumental, and non-instrumental, births were higher than the average across all Organisation for Economic Cooperation and Development (OECD) countries. In 2019, the ACT rate was 3.7% of all vaginal births. OASI can result in dyspareunia, incontinence, pain, depression and a twenty-fold likelihood of caesarean section with subsequent pregnancies.

Known risk factors for OASI are difficult to modify but given the impact of these injuries, there has been substantial research into determining evidence-based midwifery strategies to reduce the incidence of severe perineal trauma. In 2021, the Canberra Health Services introduced the Women’s Healthcare Australasia Perineal Protection Bundle consisting of five ‘care elements’, to guide clinicians in best practice and, when implemented as a whole, reduce the occurrence of OASI by 13.43%. A review is scheduled for 2025.

Anecdotal evidence indicates considerable variation in the application of midwifery practices suggested by the bundle and an early point evaluation is warranted. An evaluation of the past year’s perineal trauma rates, determining staff interpretation and application of the policy, plus a qualitative examination of women’s perceptions of care, will identify barriers and enablers. Earlier understanding of the effectiveness, limitations and identifying potential solutions to increase utilising the ‘care elements’ is crucial to ensuring the longer-term provision of the highest standard of evidence-based practice and woman-centred care.

**References:**

Aasheim, Nilsen, A. B. V., Lukasse, M., & Reinar, L. M. (2011). Perineal techniques during the second stage of labour for reducing perineal trauma. *Cochrane Database of Systematic Reviews*, *12*, CD006672–CD006672. https://doi.org/10.1002/14651858.CD006672.pub2

Beckmann, M. M., Stock, O. M., & Beckmann, M. M. (2013). Antenatal perineal massage for reducing perineal trauma. *Cochrane Database of Systematic Reviews*, *2013*(4), CD005123–CD005123. <https://doi.org/10.1002/14651858.CD005123.pub3>

Bidwell, P., Thakar, R., Sevdalis, N., Silverton, L., Novis, V., Hellyer, A., Kelsey, M., van der Meulen, J., & Gurol-Urganci, I. (2018). A multi-centre quality improvement project to reduce the incidence of obstetric anal sphincter injury (OASI): study protocol. *BMC Pregnancy & Childbirth*, *18*(1). <https://doi.org/10.1186/s12884-018-1965-0>

Bidwell, P., Sevdalis, N., Silverton, L., Harris, J., Gurol-Urganci, I., Hellyer, A., Freeman, R., van der Meulen, J., & Thakar, R. (2021). Women's experiences of the OASI Care Bundle; a package of care to reduce severe perineal trauma. *International urogynecology journal*, *32*(7), 1807–1816. <https://doi-org.ezproxy.canberra.edu.au/10.1007/s00192-020-04653-2>

Canberra Hospital and Health Services. (2021). Perineal Care Maternity. <https://health.act.gov.au/sites/default/files/2021-02/Perineal%20Care%20Procedure%20->

De Meutter, L., D van Heesewijk, A., van der Woerdt-Eltink, I., & de Leeuw, J. W. (2018). Implementation of a perineal support programme for reduction of the incidence of obstetric anal sphincter injuries and the effect of non-compliance. *European journal of obstetrics, gynecology, and reproductive biology*, *230*, 119 <https://doiorg.ezproxy.canberra.edu.au/10.1016/j.ejogrb.2018.09.021>

Gurol-Urganci, I., Bidwell, P., Sevdalis, N., Silverton, L., Novis, V., Freeman, R., Hellyer, A., van der Meulen, J., & Thakar, R. (2021). Impact of a quality improvement project to reduce the rate of obstetric anal sphincter injury: a multicentre study with a stepped-wedge design. *BJOG. an international journal of obstetrics and gynaecology*, *128*(3), 584–592. <https://doi-org.ezproxy.canberra.edu.au/10.1111/1471-0528.16396>Bottom of Form

Institute of Health and Welfare (2021). National Core Maternity Indicators, AIHW, Australian Government.

Jurczuk, M., Bidwell, P., Gurol-Urganci, I., van der Meulen, J., Sevdalis, N., Silverton, L., & Thakar, R. (2021). The OASI care bundle quality improvement project: lessons learned and future direction. *International urogynecology journal*, *32*(7), 1989–1995. <https://doi-org.ezproxy.canberra.edu.au/10.1007/s00192-021-04786-y>

Laine, K., Skjeldestad, F. E., Sandvik, L., & Staff, A. C. (2012). Incidence of obstetric anal sphincter injuries after training to protect the perineum: cohort study. *BMJ open*, *2*(5), e001649. <https://doi-org.ezproxy.canberra.edu.au/10.1136/bmjopen-2012-001649>

Lodge, & Haith-Cooper, M. (2016). The effect of maternal position at birth on perineal trauma: A systematic review. *British Journal of Midwifery*, *24*(3), 172–180. <https://doi.org/10.12968/bjom.2016.24.3.172>

Luxford, Bates, L., & King, J. (2020). “Please Squeeze”: A novel approach to perineal guarding at the time of delivery reduced rates of obstetric anal sphincter injury in an Australian tertiary hospital. *Australian & New Zealand Journal of Obstetrics & Gynaecology*, *60*(6), 914–918. <https://doi.org/10.1111/ajo.13181>

Rasmussen, O. B., Yding, A., Andersen, C. S., Boris, J., & Lauszus, F. F. (2021). Which elements were significant in reducing obstetric anal sphincter injury? A prospective follow-up study. *BMC pregnancy and childbirth*, *21*(1), 781. <https://doi-org.ezproxy.canberra.edu.au/10.1186/s12884-021-04260-z>

Wilson, A. N., & Homer, C. (2020). Third- and fourth-degree tears: A review of the current evidence for prevention and management. *The Australian & New Zealand journal of obstetrics & gynaecology*, *60*(2), 175–182. https://doi-org.ezproxy.canberra.edu.au/10.1111/ajo.13127