



# An obstetrician's nightmare: Impacted foetal head

## A retro-prospective study of maternal and foetal outcome.

Poster #: EP 268

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### INTRODUCTION

- LSCS rate in India as per NFHS-5 is **17% to 21.5%**
- Second stage caesarean rate → **2.3%**
- Foetal head may become wedged deep into the pelvis
- Additional maneuvers are needed to deliver the foetal head
- Associated with maternal and foetal comorbidities
- In UK, **1 in 10** LSCS → impacted foetal head

### OBJECTIVES:

- Assess the maternal & neonatal outcome in cases of impacted foetal head
- Assess the technique used to deliver the head
- Assess the decision to delivery time

### MATERIAL AND METHODS:

- Descriptive, retro-prospective study
- Sample size (n) : 30
- Inclusion criteria : Women for emergency LSCS, cephalic presentation, station 0 or more below, cervical dilatation 5cm or more.
- Exclusion criteria : Deep transverse arrest, CPD, twins
- Study duration : May 2023 to November 2023
- Data Analysis : EpiInfo version 7.0.1.3

### DISCUSSION:

Average age : 25.46 years  
Labour induced in 17 (56.6%)  
Labour augmented in 13 (43.3%)

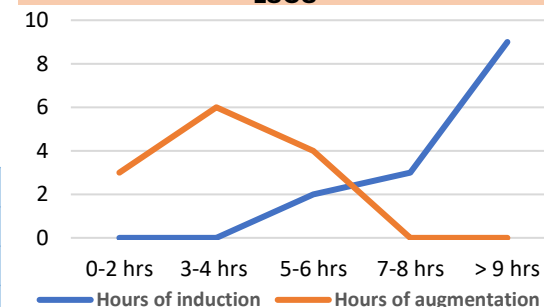
Parameter	N (%)
<b>Cervical Dilatation</b>	
10cm	15 (50%)
8cm	3 (10%)
7cm	5 (16.7%)
6cm	3 (10%)
5cm	4 (13.3%)
<b>Station</b>	
0 to +2	21 (70%)
+3 to +4	9 (30%)
<b>Parity</b>	
Primipara	18 (60%)
Multipara	12 (40%)

Average blood loss: 768 ± 139 ml  
Average time from decision to LSCS → 33.3 ± 13 mins  
ICU → 3 & Blood transfusion → 7

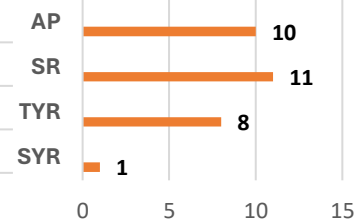
### CONCLUSION:

- No clear consensus on which is safest method
- Extension of uterine incision is most common complication
- Clinical judgement & experience is invaluable

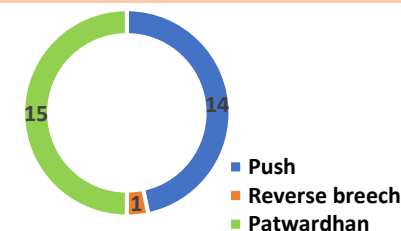
### Time of induction & augmentation to LSCS



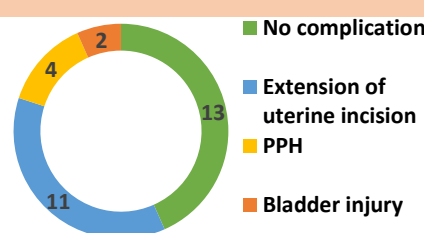
### Grade of operating obstetrician



### Technique of delivery of head



### Maternal adverse event



Outcome	Number
NICU	9 (31%)
Invasive vent	2
Non-invasive vent	4
Downes score	6/10

IOL & augmentation  
n/a/w NICU admission  
( $p=0.469$  &  $p=0.522$ )

### REFERENCES:

- Martin A, Nzulu D, Briley A, Tydeman G, Shennan A. A comparison of techniques to disimpact the fetal head on a second stage caesarean simulator. BMC Pregnancy Childbirth. 2022 Dec;22(1):34.
- Tan EK. Difficult caesarean delivery of an impacted head and neonatal skull fracture: Can the morbidity be avoided? J Obstet Gynaecol. 2007 Jan;27(4):427-8. s