Abstract

Objectives

To compare subcuticular 2/0 polyglycolic acid continuous closure with 2/0 nylon interrupted mattress closure of Joel Cohen skin incision for lower segment caesarean section with regard to cosmetic appearance of the scar, surgical site complications and surgical time.

Design

Randomized controlled trial.



Setting

A tertiary level maternity care centre in Sri Lanka.

Study population

Ninety six uncomplicated women undergoing their first caesarean section.

Method

Women were randomly allocated to two groups. In the subcuticular group the skin incision was closed by 2/0 polyglycolic acid subcuticular suture and in the nylon group by 2/0 nylon interrupted mattress sutures 3 cm apart after following a standardized method for the LSCS. Subsequent surgical site complications were documented up to hospital discharge and 8 weeks post delivery. Cosmetic appearance of the scar at 8 weeks

post delivery was independently assessed on a visual analog scale by the woman herself and an assessor blinded to the method of skin closure technique.

Results

96 consenting women were randomly allocated to subcuticular closure (52) and interrupted closure (44) and underwent allocated intervention. All subjects were followed up for early complications and there were 21 (subcuticular group 13, interrupted group 8) lost for follow up at 8 weeks.

Subcuticular method was significantly more time consuming to complete compared to the interrupted method.

There was no significant difference in the occurrence of early surgical site complications in the two groups.

The cosmetic appearance of the scar at 8 weeks assessed by the patient herself and the doctor had a similar appeal in the two groups.

Conclusion

The two methods of skin closure are equally effective.