Obstetric Anal Sphincter Injury
Information for expectant mothers

Your maternity unit is taking part in a project which aims to reduce the rate of third and fourth degree perineal tears which can occur when you give birth.

What type of tears can occur during childbirth?
It is common for the perineum to tear to some extent during childbirth. Up to 9 in every 10 women will experience some sort of tear or graze. For most, these tears are minor and heal quickly. Tears usually occur in the perineum, which is the area between the vaginal opening and the anus (back passage). Tears can also occur inside the vagina and in the labia.

First and second degree tears are the most common and are very unlikely to cause long term problems:

- **First degree**: small tears affecting only the skin which usually heal quickly and without treatment.
- **Second degree**: tears affecting the muscle of the perineum and the skin. These usually require stitches.

For some women the tear may be deeper. Third or fourth degree tears, also called obstetric anal sphincter injuries (OASI) occur in up to 6% of births for first time mothers and in 5% of subsequent births. These extend to the muscle that controls the anus (the anal sphincter) and will require stitches.

What causes third or fourth degree tears?
For many women there is no clear reason for experiencing a third or fourth degree tear and it is not possible to predict. However, it is more likely if:

- This is your first vaginal birth
- Your baby is over 4kg (9 lbs)
- You have a long second stage of labour (the stage during which you push your baby out)
- Your baby’s shoulder gets stuck behind the pubic bone (shoulder dystocia)
- You have an assisted birth (forceps or ventouse)

What is the difference between a tear and an episiotomy?
A tear happens spontaneously as the baby stretches the vagina during birth. An episiotomy is a cut made by the midwife or doctor into the perineum and vaginal wall to make more space for your baby to be born. Episiotomies are only done with your agreement. They are only done if your baby needs to be born quickly, often if you are having an assisted birth or if you are at risk of a serious perineal tear. Episiotomies are easily repaired after the birth and usually heal quickly.

How do I know what type of tear I have?
After the birth of your baby, your midwife or doctor will carefully examine your vagina, perineum and rectum to see if you have a tear, and if so, what type. They will then advise you if you need stitches. If you have a first or second degree tear, the stitching is usually done with a local anaesthetic in the room where your baby was born. If you have sustained a third or fourth degree tear, you will be transferred to the operating theatre where the stitches will be done following an epidural or spinal anaesthesia so that you have good pain relief.
What are the long term effects of third or fourth degree tears?
Most women who have a third or fourth degree tear heal completely. However, some women find they are not able to control their bowels or the passing of wind. Women who experience these symptoms will receive appropriate care, which may include physiotherapy or surgery. Some women who have a third or fourth degree tear may be concerned about having sex and may also be apprehensive about giving birth again. It is important to talk about any concerns to your midwife or doctor because support is available for you.

What can be done to reduce third and fourth degree perineal tears?

In your maternity unit, midwives and doctors will take a number of actions to try to prevent third or fourth degree tears during childbirth. This set of actions is incorporated into the OASI Care Bundle. The Care Bundle is based on the best and most up to date research evidence. It has been developed by an expert team of midwives and doctors. Your midwife or doctor will discuss the Care Bundle with you.

The Care Bundle will not affect the choices that you have made about your birth and you can still give birth in the position that you find most comfortable.

The 4 elements of the OASI Care Bundle:

1. You will be informed about OASI and what can be done to reduce the risk of it occurring.
2. Your midwife or doctor will use their hands to support both your perineum and the baby's head at the time of birth whilst communicating with you to ensure your baby is born in a slow and controlled way.
3. An episiotomy will be used, only when essential.
4. After the birth, an examination of your vagina, perineum and rectum (just inside the back passage) will be carried out to check for tears. Whilst this sounds uncomfortable (or unpleasant), it is quick and should not be painful. It is important that any perineal injury is identified and appropriately treated. Untreated perineal injury can have long-term consequences.

Is there any reason why the Care Bundle cannot be used?
The Care Bundle only applies to vaginal births and is not relevant if your baby is born by caesarean section (either planned [elective], or unplanned [emergency]). If you give birth in water, or on a birthing stool, it will not be possible for the midwife or doctor to use their hands to support your perineum and the baby’s head. However, in these positions your midwife will work with you to achieve a controlled birth.

If you have any questions or concerns about the information contained in this leaflet, please speak to your doctor or midwife.

Project evaluation
We will evaluate the OASI Care Bundle to provide evidence on how effective it is. The rates of third and fourth degree tears in your maternity unit will be continually monitored. Midwives and doctors will be asked to provide their views on the Care Bundle.

YOUR VOICE
Providing high-quality care for expectant mothers is our ultimate goal. We would like to hear from you to understand your experience of giving birth whilst your maternity unit is using the Care Bundle. You may be invited to talk to the OASI Project Team about your birth. This is voluntary and your midwife or doctor will provide you with details about this at the time.

For more information about third and fourth degree tears please speak to your midwife or doctor, or visit:
https://www.rcog.org.uk/patient-leaflet-tears-during-childbirth
If you require additional details about the OASI Project, please visit:
https://www.rcog.org.uk/OASICareBundle

The OASI Project is led by Croydon Health Services NHS Trust in collaboration with the Royal College of Obstetricians and Gynaecologists (RCOG), the Royal College of Midwives (RCM) and the London School of Hygiene and Tropical Medicine (LSHTM). It is supported by the Health Foundation.