

Skin closure options for cesarean delivery: Glue vs. subcuticular sutures

January 23 2017

In a study to be presented Thursday, Jan. 26, in the oral concurrent session, at the Society for Maternal-Fetal Medicine's annual meeting, The Pregnancy Meeting, researchers will present their findings in a study titled, Comparison of skin closure at cesarean delivery, Glue (Dermabond) versus Intra-cuticular (Monocril) sutures: A Randomized Controlled Trial.

Cesarean delivery rates have increased during the last few decades and it has become the most common surgery during a woman's reproductive years. There is currently no definite evidence regarding the best method for skin closure after a cesarean surgery. Safety of the operation, healing and cosmetic outcomes are important and should influence the physician's choice of skin closure methodology.

In this [randomized controlled trial](#), pregnant women undergoing a scheduled cesarean delivery were randomly assigned to skin closure with glue (Dermabond) or with a monofilament synthetic suture (Monocryl). Scars were evaluated after eight weeks. Primary outcome measures were Patient and Observer Scar Assessment Scale (POSAS) scores. Secondary outcome measures were surgeon satisfaction, duration of surgery, duration of hospitalization after the cesarean delivery and complications of surgical site infection or wound complications at the incision.

"Interestingly, we compared the results immediately after the cesarean delivery and within eight weeks from surgery using a validated and reliable instrument that is practical for assessing scars—POSAS,"

explained Yair Daykan, M.D., with the Dept. of Obstetrics and Gynecology at Meir Medical Center in Kfar Saba and the Sackler School of Medicine in Tel Aviv. Dr. Daykan is also the presenter of the research at the SMFM annual meeting.

The researchers found that when both a physician, unaware of the skin closure method, and the patients themselves assessed the scar there were no significant differences found between the two groups in blood loss, infections and length of postpartum hospitalization or wound disruption. Glue and suture skin closure scores using POSAS were similar eight weeks after [surgery](#).

"Both methods were shown to be safe and successful for skin closure after a scheduled cesarean delivery and, therefore, can be used based on the surgeon's and patient's preferences," added Daykan.

More information: Abstract #36 Comparison of skin closure at cesarean delivery, glue (Dermabond) versus intra-cuticular (Monocril) sutures: A randomized controlled trial, The Pregnancy Meeting, 2017.

Provided by Society for Maternal-Fetal Medicine

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