

International Conference on Gynecology and Obstetrics (ICGO-2025)

Conference Proceedings

February 07, 2025 - Singapore

Surgical Site Infections After Cesarean Delivery: Epidemiology and Prevention

Naoufel Kaabia

Consultant At the Infection Prevention and Control Center of Excellence at Prince Sultan Military Medical City in Riyadh, Saudi Arabia

The Centers for Disease Control and Prevention (CDC) defines surgical site infections (SSIs) as infections occurring within 30 days of a surgical procedure. These infections are categorized into three types: superficial incisional, deep incisional, and organ/space.

Healthcare institutions should monitor SSI rates after cesarean delivery (CD) and benchmark their performance against similar facilities as part of quality improvement initiatives. Globally, the rate of SSI following CD varies widely, ranging from 2.7% to 48%. This significant variation contributes to increased maternal morbidity and, in some cases, mortality, patient dissatisfaction, prolonged hospital stays, and elevated healthcare costs. These differences between countries likely reflect variations in population demographics, pre- and postoperative practices, study methodologies, patient comorbidities, antibiotic use, and reporting practices.

Several risk factors for SSI after CD have been identified, including maternal characteristics, intrapartum and operative factors, and care provided within academic teaching settings.

Beyond the core SSI prevention bundle, several effective interventions can further reduce infection rates. These include preoperative vaginal cleansing with povidone-iodine, subcutaneous tissue closure with sutures when wound depth exceeds 2 cm, skin closure with sutures rather than staples, and minimizing operating room traffic during procedures. Each hospital should develop a tailored CD surgical bundle incorporating these and other evidence-based practices to minimize SSI rates.