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Revise the caesareans, save women lives

Introduction: In 1882, Max Sanger, a 28 years old assistant at Leipzig, was the first surgeon to suture uterine wall and saved women from death. So many years after and bleeding during Caesareans remains life threatening. Amazingly the causes are considered same as for vaginal delivery. It is time now time to revise autonomously the causes of PPH during caesareans.

Purpose: To authenticate the surgeon, the most undefined factor. His expertise and improved techniques will alter the blood loss. To show that available devices from the market now showing to formulate an easier procedure and minimise bleeding.

The Facts: 1) The Surgeon remains the undefined factor for the bleeding. His expertise and methods are not included in the under evaluation factors. 2) The training for juniors to perform caesareans seems basic,

national guidelines do not embrace new techniques. 3) caesarean rate increased to staggering five times from Sanger times. 4) The way the procedure performed remained unchanged 5) Uterine Compression can easily be applied but not evaluated adequately, (abdominal packs and exteriorisation of uterus). 6) No literature with regards how to perform complicated types of procedure. 7) The procedure nowadays becomes more complex than ever (obesity, repeated C/S, increased inductions). 8) Available devices from market now can formulate an easier procedure and yet very rarely used.

Conclusion: It is now for the first time since the expertise of a surgeon saved all women lives, to revise the bleeding causes during caesareans to recognise the role of the surgeon. That will be a great contribution to our modern obstetrics, moving forward by looking back to Max Sanger.

Biography

Christos Tsitlakidis has graduated from Hellenic Aristotle University School of Medicine. He is a consultant Obstetrician and Gynaecologist in Pinderfields Hospital, MidYorkshire NHS Trust, United Kingdom. He has published more than 6 papers in reputed journals in UK and abroad and has been member of the RCOG.

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