

Auditing Rates of Severe Perineal Trauma Associated with Instrumental Vaginal Birth at a Victorian Tertiary Maternity Centre

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Introduction

Severe perineal trauma (SPT), defined as third- or fourth-degree tears sustained during childbirth, is associated with considerable maternal morbidity, including pain, incontinence, dyspareunia, and psychological distress. In Australia, SPT occurs more frequently following instrumental vaginal birth (5.3%) compared with vaginal birth overall (2.7%). Higher rates have also been reported amongst women born in Southern, South-East and Central Asia.

Aims

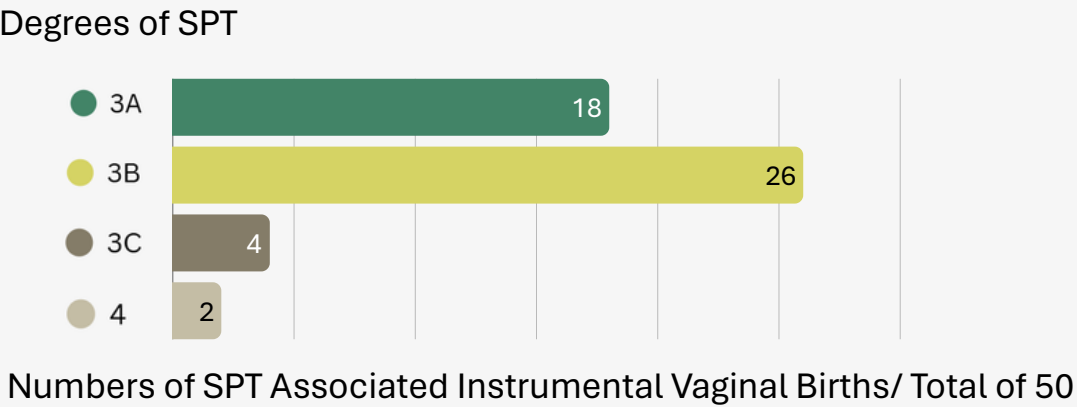
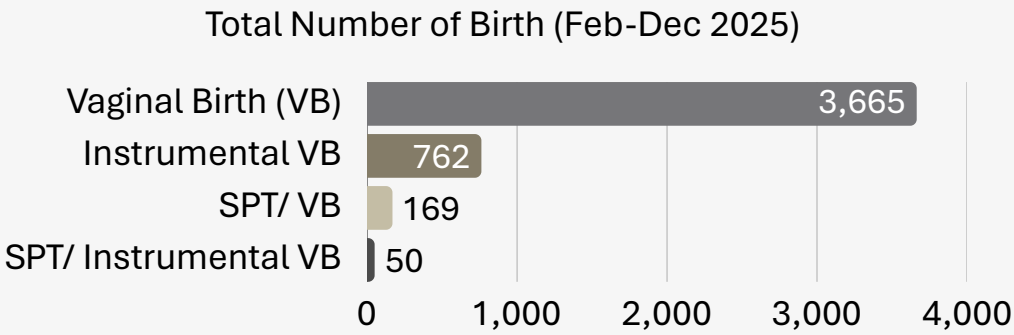
This audit aimed to assess the rate of SPT following instrumental vaginal birth at a tertiary maternity centre and compare it with the national average. A secondary aim was to identify the proportion of affected women born in regions with increased SPT risk.

Methods

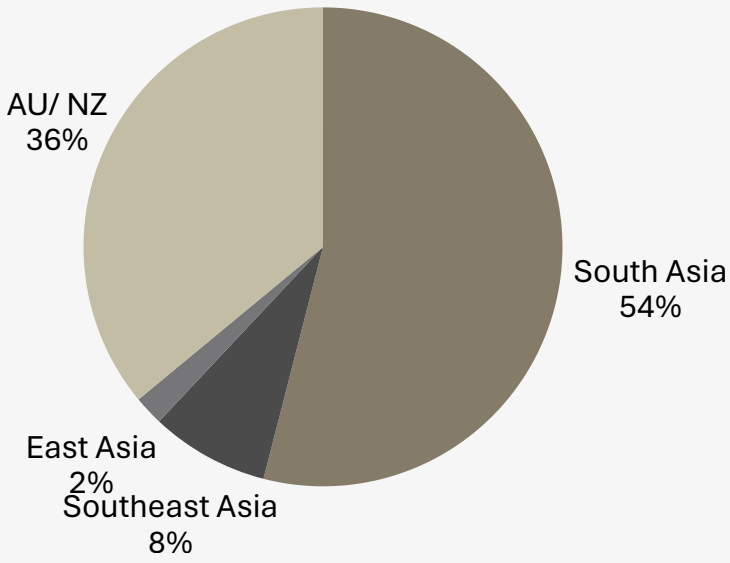
A retrospective audit was conducted at Joan Kirner Women's and Children's Hospital (JKWCH), Victoria, from 1 February to 31 December 2025. Monthly searches of the Birthing Outcomes System identified all vaginal births, which were reviewed for perineal outcomes. Data was collected on women who experienced SPT following instrumental birth, including country of birth.

Results

- During the audit period:
- 3665 vaginal births occurred, including 762 instrumental births.
 - 50 of the 762 women who delivered via instrumental birth sustained SPT (6.56%).
 - Of these women, 35 (64%) were born in high-risk regions.



Ethnicities of Women who Sustained SPT Associated with Instrumental Vaginal Birth



Discussion

SPT rates at JKWCH exceeded the national average of 5.3%. Women born in Southern, South-East and Central Asia were disproportionately affected, however this is likely skewed by the diverse migrant demographic JKWCH serves. Planned quality improvement initiatives for 2026 include earlier identification of at-risk women and implementation of an instrumental birth bundle to reduce SPT rates.