

Shoulder dystocia: a preventable obstetric emergency?

Ilaria **Baiguini***, Elena **Osella**, Diletta **Guglielmi**, Ilaria **Ferrante**, Michela **Sonzini**, Giulia **Mazzoni**, Valeria **Poletti de Chaurand**, Chiara **Comerio**, Santa **Barresi**, Bruna **Pasini**, Silvia **Belloli**, Antonella **Fucà**, Luisa **Patanè**

ASST Papa Giovanni XXIII, Bergamo, Italy.

DOI: 10.36129/jog.2022.S89

Objective. The aim of the study was to evaluate the maternal risk factors and the neonatal outcomes in women whose delivery was complicated by shoulder dystocia.

Materials and Methods. We retrospectively reviewed data charts of all deliveries complicated with shoulder dystocia from January 2019 to December 2021 in our hospital. We analysed prepartum maternal risk factors (diabetes and BMI > 30), intrapartum risk factors (operative vaginal delivery, induction of labour, Kristeller manoeuvre, expulsive phase lasting more than 60 minutes) and obstetrical manoeuvres used at the delivery. We also analysed the neonatal outcomes (pH, Apgar score, NICU admission, neonatal sequelae).

Results. 63 women were included in the study. Twenty (30%) did not have any risk factors, 43 (70%) had at least one risk fac-

tor while 24 had only intrapartum risks. Ten out of 63 (15.8%) neonates experienced brachial plexus palsy and 11 were admitted to NICU (17.4%). Of these 11 newborns, 3 deliveries (27%) had no prenatal risk factor, 8 (73%) had at least one and 3 had intrapartum risk factors. Eight (72%) of these newborns were delivered with the Jacquemier manoeuvre. Three neonates out of the 20 deliveries without risk factors were admitted to NICU (15%) as well as 3 out of the 24 with intrapartum risk factors (12.5%) and 1 out of the 9 with intrapartum and prepartum risk factors (11.1%).

Conclusions. There are still a considerable portion of deliveries which are complicated by shoulder dystocia that cannot be foreseen. In order to manage these events staff must be trained to face emergency settings with simulations and updates.