

Caesarean Section in a morbidly obese woman: A success story



The prevalence of obesity has reached pandemic proportions across nations. Morbid obesity has a dramatic impact on pregnancy outcome. Cesarean section in these women poses many surgical, anesthetic, and logistical challenges. Morbidly obese women with a body mass index (BMI) >40 kg/m² are at increased risk of pregnancy complications and a significantly increased rate of cesarean delivery and complications of cesarean section due to obesity.

Here we report a successful case of caesarean section in a morbidly obese woman performed at our hospital by Dr Anita Soni in January 2012.

Our patient, 36 years old, weighing 153 Kg with a BMI of 57.5 Kg/m² (morbidly obese), Gravida 2 with a previous caesarean section with gestational diabetes mellitus with mild preeclampsia with hypothyroidism was taken up for an elective repeat caesarean section at 37 weeks of pregnancy.

Low transverse skin incision was taken and the abdomen was opened in layers with extra retraction. The baby was delivered with the help of Obstetric forceps. Baby weighing 4.4 Kg was born. Abdomen was closed in layers with special attention to rectus sheath and a subcutaneous drain was kept. Thromboprophylaxis was given and prophylactic antibiotics were given which helped in reducing postpartum morbidity. (Morbidly obese women are at increased risk of postpartum infectious morbidity).

Our patient recovered very well with an uneventful postoperative period with no complications. Weight reduction in the postpartum period and thereafter was advised to her.