



ALAT DAN BAHAN PADA PENJAHITAN ROBEKAN PERINEUM

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Disampaikan pada :

**Workshop Penjahitan Robekan Perineum pada Persalinan Vaginal
untuk Bidan**

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Introduksi

- Penegakan derajat robekan perineum
- Edukasi dan Informed Consent
- Ruang tindakan dengan pencahayaan yang baik
- Alat dan bahan yang dipersiapkan dengan baik
- Ketrampilan dalam teknik penjahitan
- Perawatan pasca tindakan

Ruang Tindakan

- Sterilitas harus terjaga
- Meja operasi/ meja ginekologi
- Instrumen yang siap pakai dalam kondisi steril
- Pencahayaan harus baik

→ kasus robekan perineum darajat III dan IV

Healing times for different tissues



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Tissue	Healing Time
Skin	1-2 weeks
Subcutaneous tissue	2 weeks
Peritoneum	4-10 days
Uterus	8 days
Vagina and perineum	8-10 days
Bladder	5 days
Ligaments tendons	6 weeks

Alat yang dibutuhkan

- Retraktor, spekulum (3)
- Forsep gigi (2)
- Needle holder (1)
- Forsep Allis (4)
- Forsep arteri (6)
- Gunting Mitzenbaum (1)
- Gunting benang/pemotong jahitan (1)
- Forsep pemegang kassa (1)

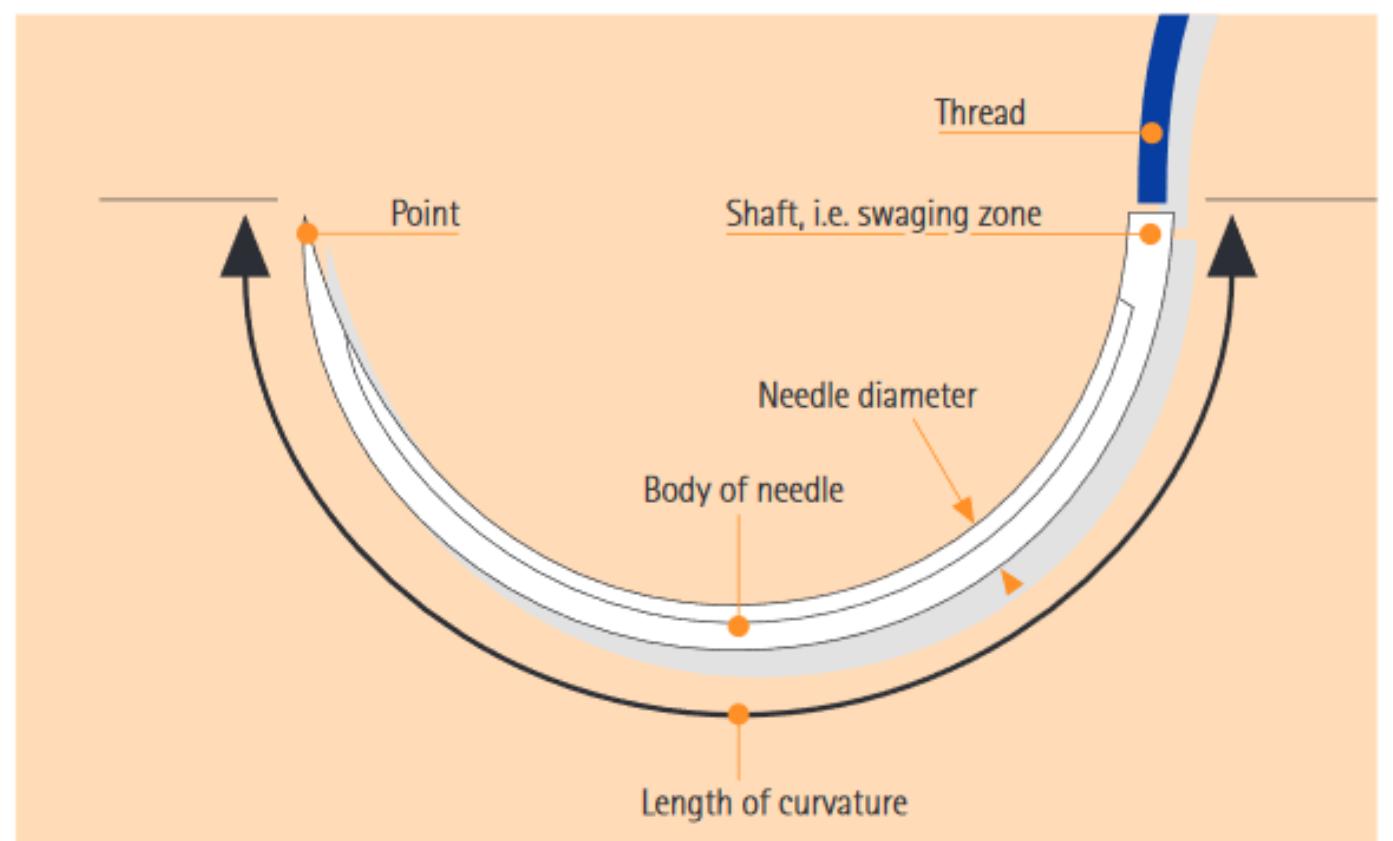
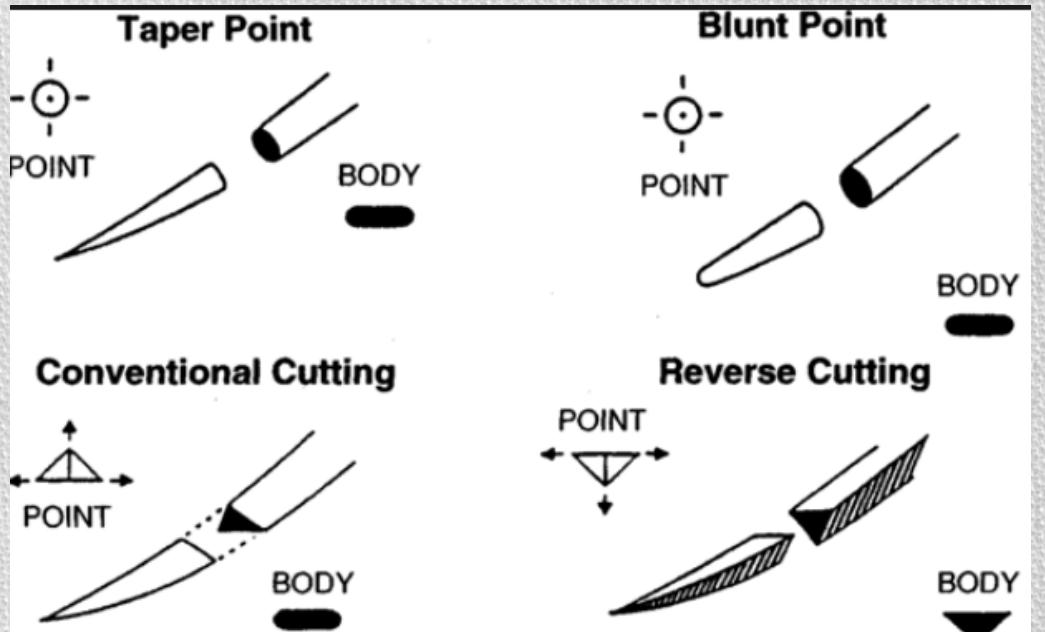


Figure 36.4 Instruments specifically used for repair of AS trauma. From left to right: tooth forceps; stitch cutting scissors; needle holder; McIndoe's scissors; artery forceps; Allis forceps; Weislander retractor

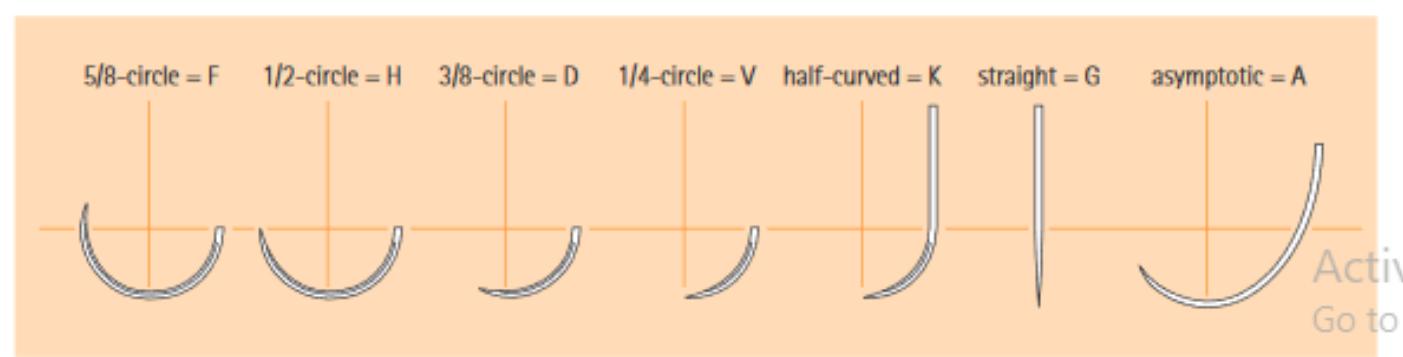
BAHAN

- Sarung tangan steril
- Kassa steril
- Povidon iodine
- Lidocain 0,5-1% → robekan perineum derajat I dan II
- Benang
- Jarum

JARUM

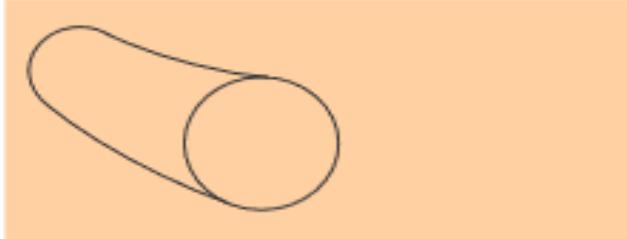


Needle shapes



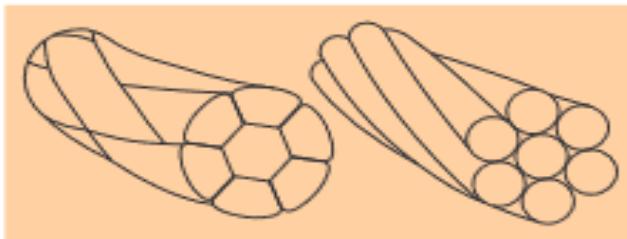
BENANG

Monofilament



A monofilament consists of only one thread filament.

Multifilament



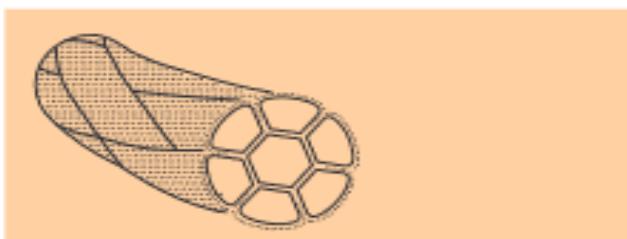
A multifilament consists of many thin elementary fibres which are either twisted, entwined or braided into bundles.

Coated or pseudo-monofilament



The thread interior (the so-called thread core), a bundle of parallel filaments, is imbedded in a mantle-like or tube-like coating that provides a smooth cover.

Multifilament coated



Multifilaments can be treated with various special coating materials to improve their mechanical properties. In this way gaps between the filament bundles are evened out and surface friction is reduced.

BENANG YANG DAPAT DISERAP

Table 1: Absorbable sutures

Type	Material	Duration at maximum strength (days)	Complete absorption time (days)	Colors available
Catgut	Sheeps' intestine submucosa	3–4	Variable	Undyed
Chromic catgut	As above but tanned with chromic salts to delay absorption	10–14	>120	Undyed
Dexon	Polyglycolic	10–14	90–120	Undyed or green
Vicryl	Polyglactin 910	14–21	90	Undyed or purple
Polyglyconate	Glycolic acid and trimethylene carbonate	10–14	180	Undyed
Glycomer 631	Polyester of glycolide, dioxanone and trimethylene carbonate	12–20	90–110	Undyed
Polyglytone 6211	Polyester of glycolide, caprolactone, trimethylene carbonate and lactide	7–10	Variable	Undyed

Sutures and suturing techniques in skin closure

BENANG YANG TIDAK DAPAT DISERAP

Table 2: Nonabsorbable sutures

Type	Material	Thread structure	Knots secure?	Tissue reaction	Color
Silk	Silk	Braided	Yes	++	Black
Nylon	Polymers of nylon 6	Braided and mono/multifilament	Fair	±	Undyed/dyed blue or green
Prolene	Polypropylene	Monofilament	Fair	±	Blue/undyed
Polyester	Polyethylene terephthalate	Braided/multifilament	Fair	±	Undyed/dyed blue or green
Hexafluoro-propylene	Polyvinylidene fluoride and polyvinylidene fluoride-co-hexafluoropropylene	Monofilament	Fair	±	Dyed blue

Sutures and suturing techniques in skin closure

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Rekomendasi Benang menurut Evidence Based Medicine

6. Suture material

The use of absorbable synthetic material (polyglycolic acid and polyglactin 910) for repair of perineal trauma is associated with less perineal pain, analgesic use, dehiscence and resuturing, but increased suture removal, when compared with catgut.

A

The use of a more rapidly absorbed form of polyglactin 910 for repair of perineal trauma is associated with a significant reduction in pain and a reduction in suture removal when compared with standard absorbable synthetic material. In the light of current evidence, rapid-absorption polyglactin 910 is the most appropriate suture material for perineal repair.

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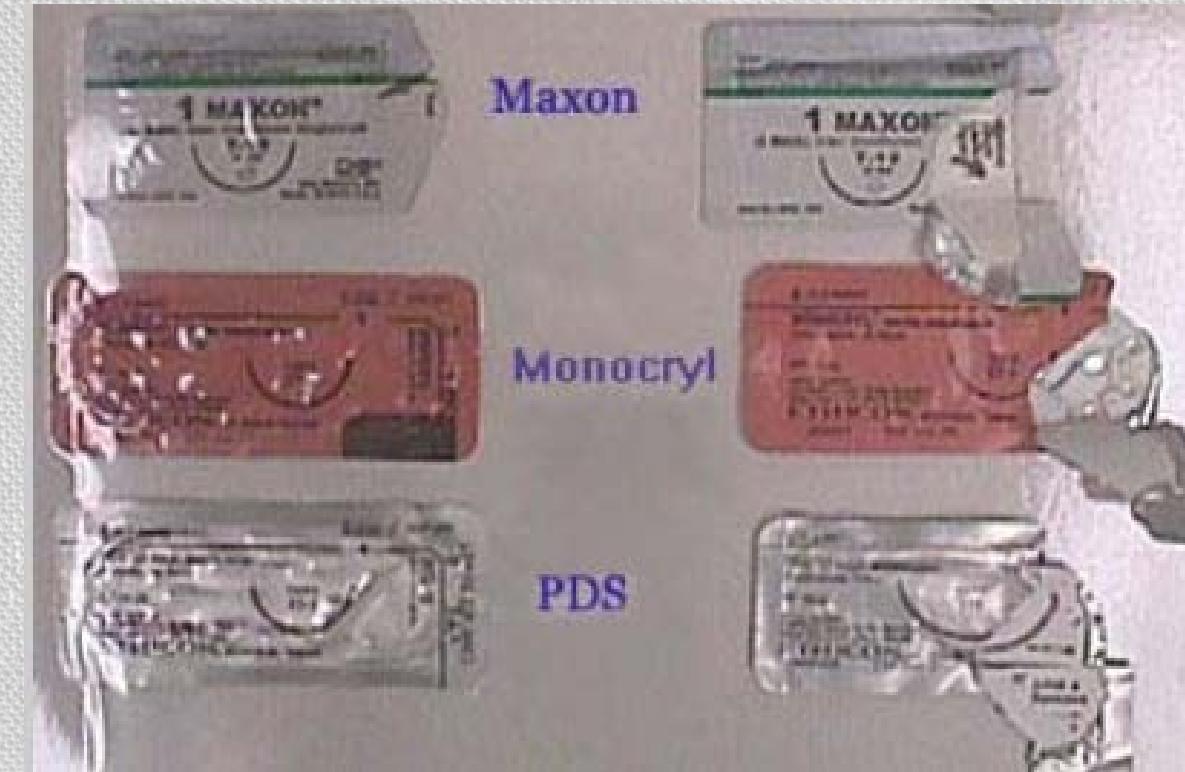
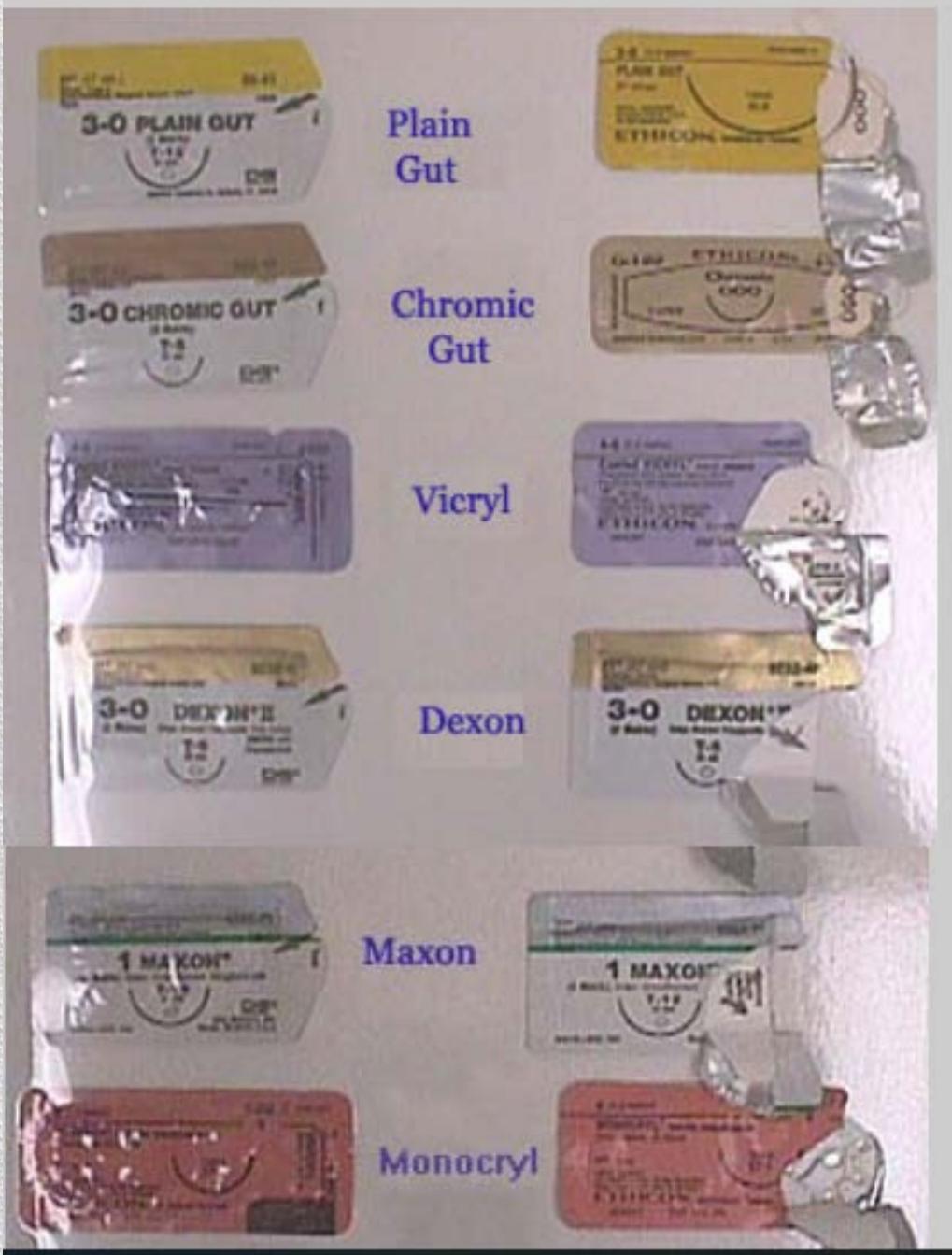
Royal College of
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Setting standards to improve women's health

Guideline No. 23
Revised June 2004

Rekomendasi Pilihan Benang

Mukosa Anus	Polyglactin 910 atau Polydioxanone	3-0
Sfingter Ani Interna	Polyglactin 910 atau Polydioxanone	3-0
Sfingter Ani Eksterna	Polyglactin 910 atau Polydioxanone	2-0
Otot Perineum	Polyglactin 910 atau Polydioxanone	3-0
Mukosa Vagina dan Perineum	polyglactin 910 atau polyglycolic acid absorbsi cepat	3-0



TERIMA KASIH