



www.figo.org

Contents lists available at SciVerse ScienceDirect

International Journal of Gynecology and Obstetrics

journal homepage: www.elsevier.com/locate/ijgo



EDITORIAL

Announcing the winner of the John J. Sciarra IJGO Prize Paper Award for 2012

International Journal of Gynecology and Obstetrics 119 (2012) 159–162

CLINICAL ARTICLE

The effect of post-cesarean rectal misoprostol on intestinal motility

Abiodun I. Adanikin^a, Ernest O. Orji^{a,b,*}, Olusola B. Fasubaa^{a,b}, Uche Onwudiegwu^{a,b}, Omotade A. Ijarotimi^{a,b}, Oluwaseyi Olaniyan^a^a Department of Obstetrics, Gynecology and Perinatology, Obafemi Awolowo University Teaching Hospitals Complex, Ile-Ife, Nigeria^b Department of Obstetrics, Gynecology and Perinatology, Obafemi Awolowo University, Ile-Ife, Nigeria

ARTICLE INFO

Article history:

Received 23 January 2012

Received in revised form

10 May 2012

Accepted 12 July 2012

Keywords:

Intestinal motility

Misoprostol

Oxytocin infusion

ABSTRACT

Objective: To determine whether rectally administered misoprostol can induce intestinal motility compared with oxytocin infusion when used to prevent primary postpartum hemorrhage after cesarean delivery. **Methods:** In a prospective randomized double-blind study in Nigeria, 218 parturients undergoing cesarean delivery who had risk factors for primary postpartum hemorrhage were enrolled between July 1, 2010, and March 31, 2011. Participants received 600 µg of rectal misoprostol or 20 intravenous units of oxytocin for 4 hours after surgery. The primary outcome was time until passage of flatus. Adverse effects, need for additional analgesic, and length of hospital stay were also assessed. **Results:** The misoprostol group had a significantly shorter mean postoperative interval to passage of flatus (20.27 ± 7.77 hours versus 38.34 ± 10.98 hours; $P < 0.001$) and commencement of regular diet (21.08 ± 7.69 hours versus 39.13 ± 10.94 hours; $P < 0.001$). Gastrointestinal adverse effects were more frequent, albeit not significantly, in the misoprostol group: nausea, 6.4% versus 1.8%; vomiting, 7.3% versus 2.8%; and abdominal distension, 3.7% versus 2.8%. The need for additional analgesic was the same in the 2 groups. **Conclusion:** After cesarean delivery, rectal misoprostol had the added benefit of inducing intestinal motility. Misoprostol might be considered in a clinical setting where postoperative ileus is anticipated.

© 2012 Published by Elsevier Ireland Ltd. on behalf of International Federation of Gynecology and Obstetrics.

The editors of the *International Journal of Gynecology and Obstetrics* (IJGO) are pleased to announce the winner of the prize award for the best clinical research paper from a low- or middle-income country published in the IJGO during 2012. The winning paper is by A Adanikin, E Orji, O Fasubaa, U Onwudiegwu, O Ijarotimi, O Olaniyan. **The effect of post-cesarean rectal misoprostol on intestinal motility.** Int J Gynecol Obstet 2012; 119(2): 159–162. It was published in the November 2012 issue of the IJGO.

This award brings with it a stipend of €1000, a 1-year subscription to ScienceDirect, Elsevier's web database of journals, reference works, and book series (www.sciencedirect.com), and an award certificate for each of the authors.

All clinical research articles submitted to the IJGO from low- and middle-income countries that were published in 2012 were considered

for this prize. The paper was chosen from 94 qualifying articles. Selection and review were undertaken by the editors and the decision was endorsed by the Editorial Board of the IJGO.

Additional papers that are worthy of special recognition are awarded an honorable mention. While the honorable mention recognition does not include a financial award, each author receives a certificate of recognition and a letter of commendation from the editors of the IJGO.

The IJGO Prize Paper Award was established in 1998 for the purpose of encouraging investigators, especially young scientists, from low- and middle-income countries to submit their best clinical research articles for publication in the Journal. The IJGO is the official publication of the International Federation of Gynecology and Obstetrics (FIGO), the primary international organization for the specialty of obstetrics and

gynecology. FIGO is dedicated to enhancing the health care of women worldwide.

The following 12 papers receive an honorable mention.

Honorable mentions 2012

Egypt

Elsedeek MS. Impact of preoperative rectal misoprostol on blood loss during and after elective cesarean delivery. *Int J Gynecol Obstet* 2012;118(2):149–52.

Thailand

Thaisomboon A, Russameecharoen K, Wanitpongpan P, Phattanachindakun B, Changnoi A. Comparison of the efficacy and safety of titrated oral misoprostol and a conventional oral regimen for cervical ripening and labor induction. *Int J Gynecol Obstet* 2012;116(1):13–16.

Philippines

Garces RG, Sobel HL, Pabellon JA, Lopez Jr JM, de Quiroz Castro M, Nyunt-U S. A comparison of vital registration and reproductive-age mortality survey in Bukidnon, Philippines, 2008. *Int J Gynecol Obstet* 2012;119(2):121–4.

China

Chen Y, Huang Y, Jiang R, Teng Y. Syncytiotrophoblast-derived micro-particle shedding in early-onset and late-onset severe pre-eclampsia. *Int J Gynecol Obstet* 2012;119(3):234–8.

India

Puri M, Taneja P, Gami N, Rehan HS. Effects of different doses of intraumbilical oxytocin on the third stage of labor. *Int J Gynecol Obstet* 2012;118(3):210–12.

Brazil

Canário AC, Cabral PU, Spyrides MH, Giraldo PC, Eleutério Jr J, Gonçalves AK. The impact of physical activity on menopausal symptoms in middle-aged women. *Int J Gynecol Obstet* 2012;118(1):34–6.

Iran

Zangeneh M, Malek-Khosravi S, Veisi F, Rezavand N, Rezaee M, Rajatee M. Multiple-dose vaginal misoprostol and single-dose misoprostol plus oxytocin for termination of second-trimester pregnancy. *Int J Gynecol Obstet* 2012; 117(1):78–80.

Kenya

Khisa W, Wakasiaka S, Kagema F, Omoni G. Contraception knowledge and practice among fistula patients at referral centers in Kenya. *Int J Gynecol Obstet* 2012;118(3):220–22.

Uganda

Osinde MO, Kakaire O, Kaye DK. Factors associated with disclosure of HIV serostatus to sexual partners of patients receiving HIV care in Kabale, Uganda. *Int J Gynecol Obstet* 2012; 118(1):61–4.

Sudan

Ali AA, Abdallah TM. Clinical presentation and epidemiology of female genital tuberculosis in eastern Sudan. *Int J Gynecol Obstet* 2012; 118(3):236–38.

Mexico

Sordia-Hernández LH, Rodríguez DS, Vidal-Gutiérrez O, Morales-Martínez A, Sordia-Piñeyro MO, Guerrero-González G. Factors associated with the need for blood transfusion during hysterectomy. *Int J Gynecol Obstet* 2012;118(3):239–41.

South Africa

Naidoo TD, Moodley J, Esterhuizen TE. Incidence of postpartum anal incontinence among Indians and black Africans in a resource-constrained country. *Int J Gynecol Obstet* 2012;118(2):156–60.

Timothy R.B. Johnson M.D.

Editor

International Journal of Gynecology and Obstetrics,
Bates Professor of Diseases of Women and Children,
Chairman of the Department of Obstetrics and Gynecology,
University of Michigan, Ann Arbor, MI, USA