

# Executive Summary of the study Marta Artola Peres de Azanza et al. (2015) “Is the Epi-no® trainer a device for preventing perineal trauma of obstetric origin?”

Artola Peres de Azanza M, Sánchez Langreo A, Gippini Requeijo I, Gómez Grande M, Estaca Gutiérrez-Argumosa G, Cristobal García I. *¿Es el dispositivo Epi-no® una herramienta de prevención de las lesiones perineales de origen obstétrico? Prog Obstet Ginecol. 2016;59:125-133.*

EPI-NO Clinical Study, Department of Gynaecology and Obstetrics. La Zarzuela Hospital, Madrid, Spain, 2016

The study presented in “Is the Epi-no® trainer a device for preventing perineal trauma of obstetric origin?” evaluates the effectiveness of the Epi-no and perineal massage in preventing perineal trauma during childbirth. The research involved 332 pregnant women divided into three groups: a control group (group A; CG), a perineal massage group (group B; PMG), and an Epi-no device group (group C; EPG). The study's objective was to determine whether these interventions reduce the incidence of perineal trauma, including episiotomies and tears, and improve overall childbirth outcomes.

## Key Findings

### 1. **Reduction in Episiotomy Rates:**

The Epi-no group exhibited significantly lower episiotomy rates (37 %) compared to the perineal massage group (55.3 %) and the control group (69 %).

### 2. **Increased Rate of Intact Perineum:**

Women in the Epi-no group had a higher likelihood of an intact perineum (32 %) compared to the perineal massage (8.7 %) and control groups (2.3 %).

### 3. **Shorter Second Stage of Labour:**

The Epi-no group experienced a reduction in the duration of the second stage of labour, with an average of 65.9 minutes, compared to the perineal massage group and control group.

### 4. **Lower Instrumental Delivery Rates:**

The study found lower rates of instrumental deliveries in the Epi-no group (28 %) compared to the massage group (35.9 %) and the control group (50.4 %).

### 5. **Safety for Fetal Outcomes:**

There were no significant differences in fetal outcomes, such as APGAR scores and fetal pH, across the three groups.

## Benefits

### 1. **Effective Prevention of Perineal Trauma:**

The Epi-no device is an effective tool for reducing the likelihood of perineal trauma, specifically episiotomies, and promoting a higher rate of intact perineum.

**2. *Reduced Need for Instrumental Deliveries:***

The use of the Epi-no device is associated with a lower need for interventions (e.g. forceps or vacuum-assisted deliveries), leading to a more natural childbirth process.

**3. *Potential for Shorter Labour:***

The device may contribute to a shorter second stage of labour, reducing the physical strain on the mother.

## Conclusion

The Epi-no device offers significant benefits in preventing perineal trauma during vaginal delivery, decreasing the need for episiotomies, and enhancing the likelihood of an intact perineum. Its use also correlates with shorter labour duration and reduced necessity for instrumental delivery, making it a valuable tool in antenatal care.