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Detecting Intra-abdominal Adhesions in Women with Repeated Cesarean Sections

Using the ultrasound sliding sign effectively differentiates between patients at high risk and low risk of intraperitoneal adhesion formation among women undergoing repeated cesarean sections, suggests a study published in the *Journal of Obstetrics and Gynaecology*¹.

The purpose of this cross-sectional study was to evaluate the efficacy of ultrasound sliding sign in predicting intraperitoneal adhesions among women undergoing repeated cesarean sections. The sliding examines the mobility of the uterus against the anterior abdominal wall using ultrasound. Women scheduled for an elective cesarean, with at least one prior cesarean delivery were eligible for the study.

To assess intraperitoneal adhesions, the sliding sign of the uterus against the anterior abdominal wall was used. A positive sliding sign was indicative of free mobility of the uterus, while a negative sliding sign indicated limited mobility. The obstetrician performing the ultrasound examination was blinded to the ultrasound results and was asked to independently report the presence or absence of adhesions during the procedure, without knowledge of the ultrasound findings.

The study involving 120 women observed that 54 patients had a negative sliding sign, while 66 patients exhibited a positive sliding sign. Subsequently, 44 out of

the 54 patients with a negative sliding sign were found to have intra-abdominal adhesions during the cesarean section procedure and were categorized as the high-risk group. Conversely, no adhesions were found in any of the 66 patients with a positive sliding sign, designated as the low-risk group. The sensitivity of the sliding sign in predicting adhesions was found to be 100%, while the specificity was 86.84%. It had a positive predictive value of 81.5, a negative predictive value of 100 and had an accuracy of 91.67.

Based on the results of our study, the authors concluded that the sliding sign is an effective method for detecting intra-abdominal adhesions in women with a history of repeated cesarean delivery. The sliding sign demonstrated promising accuracy in identifying patients at risk of adhesion formation as it accurately identified all cases with confirmed adhesions and was also able to correctly identify patients without adhesions. Hence, the sliding sign is a "rapid, easy and reliable method for prediction of intraperitoneal adhesions".

REFERENCE

1. Yosef AH, Youssef AEA, Abbas AM, Mohamed AA, Mostafa SM, Ibrahim MN. The use of ultrasound sliding sign for prediction of adhesions in women undergoing repeated caesarean section. *J Obstet Gynaecol.* 2023;43(1):2114333.

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