Post-Partum Complications
*post-partum is the time from delivery of neonate and placenta to 6-8 weeks following delivery.
* United States Joint Commission on Maternal Welfare: post-partum fever defined as >38°C on any two of first 10 days, excluding the first 24 hrs.

I. Post-partum fever
   a. Uterine Infection
      i. Risk Factors
         1. Route of delivery biggest risk factor
            a. C-section >>> vaginal
         2. In vaginal deliveries => membrane rupture, prolonged labor, multiple cervical examinations, manual removal of placenta
         3. In C-sections => same + internal fetal monitoring. If all factors present and pt does not receive antibiotics w/ section 90% risk of pelvic infection
         4. If intrapartum chorioamnionitis – 13% risk of metritis
         5. Colonization w/ chlamydia, mycoplasma, ureaplasma, gardnerella associated with increased risk
         6. General anesthesia, multifetal gestation, young maternal age, nulliparity, prolonged labor induction, obesity, meconium stained fluid
      ii. Micro
         1. Indigenous to genital tract (GPCs, GNRs, anaerobes)
         2. Group A strep
         3. MRSA
         4. Polymicrobial
         5. Chlamydia – late onset, indolent metritis
      iii. Pathogenesis
         1. Vaginal – placental implantation site, decidua, myometrium, or cervicovaginal lacerations
         2. C-section – infection of surgical site
      iv. Presentation
         1. fever
         2. abdominal pain
         3. parametrial tenderness or uterine tenderness
         4. foul lochia
         5. leukocytosis
      v. Treatment
         1. Ampicillin and gentamicin if post-vaginal
         2. Anaerobic coverage indicated if c-section. Add clindamycin
   b. Breast engorgement
      i. 15% of women who do not breastfeed develop fever
      ii. Rarely >39°C or >24 hours
   c. Urinary infections
      i. Less common d/t normal diuresis post-partum
d. Episiotomy and abdominal incision infection
   i. Increased risk with obesity, DM, steroids, anemia, HTN, inadequate hemostasis
   ii. Incisional abscess – **fever by 4th day**
   iii. Episiotomy breakdown – localized to skin and sub-Q usually

e. Adnexal abscess and peritonitis
   i. Rare
   ii. Present 1-2 wks post-partum
   iii. **May not see abdominal rigidity in peritonitis d/t post-partum laxity in abdomen**

f. Perineal lacerations

g. Septic pelvic thrombophlebitis
   i. Rare
   ii. Usually associated with endomyometritis

h. Respiratory complications after c-section
   i. Atelectasis (controversial cause of fever)

References
- Berens P, Overview of post-partum care. Uptodate.com Viewed on 10/18/14
  http://www.uptodate.com/contents/overview-of-postpartum-care