Letter to the editor: Impact of the EPISCISSORS-60 mediolateral episiotomy scissors on obstetric anal sphincter injuries: a 2-year data review in the United Kingdom

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We had the great pleasure of reading the article titled “Impact of the EPISCISSORS-60 mediolateral episiotomy scissors on obstetric anal sphincter injuries: a 2-year data review in the United Kingdom” written by Koh et al. [1]. We congratulate the authors for choosing this theme. The article addresses the sustained reduction in OASIS rates associated with using EPISCISSORS-60®. However, we want to make a few points. It was better to compare confounding factors such as a prolonged second stage of labor, operative assisted vaginal births, maternal and neonatal characteristics and race [2] in the study of 2014 and 2016–2017.

The use of episiotomy for the prevention of OASIS is not routinely recommended [3, 4]. It seems that the increase in episiotomy (29% vs 33.7%) [1] in nulliparous women can be the reason for the causal decrease in obstetric anal sphincter injuries (OASIS) [5], and the causal decrease can not be simply attributed to the use of PISCISSORS-60. In other words, the causal reduction OASIS can be due

to the increased use of episiotomy incisions by clinicians and midwives with ordinary scissors or EPISCISSORS-60. Therefore, it is better to judge EPISCISSORS-60's performance in the causal reduction of OASIS by randomized controlled trial studies.

Conflict of interest

The authors declare that they have no conflict of interest.

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