Honey to reduce perineal pain during postpartum: A randomized controlled trial

D. Gerosa (desiree.gerosa@gmail.com) – M. Ehinger (marika.ehinger@hotmail.com) – B. Marinez de Tejada – M. J. Gutierrez

Background

Rate of perineal lesions after vaginal birth

- 1st degree - 26.8%
- 2nd degree - 46.8%
- 3rd degree - 9.1%
- 4th degree - 0.6%

Exclusion criteria:
- 3rd, fourth degree perineal tear, cervica l lacerations
- Post-partum hemorrhage
- Allergy to honey
- Drugs misuse

Methods

Randomized controlled trial

Inclusion criteria:
- > 18 years
- Vaginal birth at HUG
- Understanding and able to read French

Allocation:
- Randomized

1.1 Allocation

- Eligible (n=99)
- Randomized (n=68)
- Allocated to control group (n=34)
- Allocated to intervention group (n=34)

1.2 Follow-Up

- Lost to follow-up (n=3) - Unreturned questionnaires

1.3 Analysis

- Analyzed (n=31) - Questionnaires with completed “VAS pain” variable: 28
- Stratification: Grazes n(%):
  - 1/3: 31 (35.48)

Sample size

- 56 women required, 28 in each group
- Alpha: 0.05
- Power: 80%

Objective 1: To evaluate the pain relief effect with honey usage on perineal lesions with or without grazes

Objective 2: To evaluate maternal satisfaction of application of the honey and the use of pain killer

Honey selected

- Manuka honey if from New Zealand Tea tree. It is effective against bacteria such as Staphylococcus aureus.

Results

1.4 Use of pain killer

- Pain scores at day 1 (n=26) vs day 4 (n=26)
- Pain scores reduction: 41.9%

Discussion and conclusion

Honey does not reduce perineal pain during the postpartum period

Women with honey use less Ibuprofen on day 4

Women are satisfied with the use of honey on perineal lesions

References