

EP16.87. Early postpartum detection of uterine niche using transvaginal ultrasound: clinical and ultrasonographic correlates

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DEFINITION

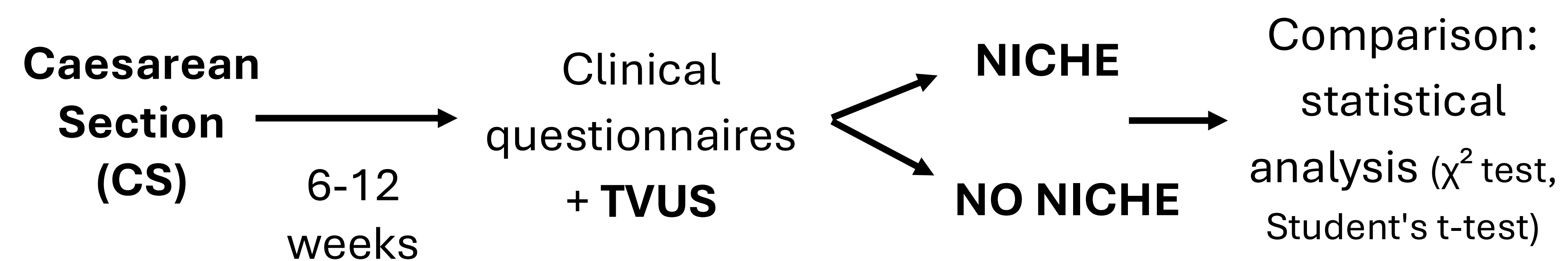
Uterine niche: myometrial defect ≥ 2 mm at a previous caesarean section (CS) scar, which may cause abnormal bleeding or pelvic pain.

OBJECTIVES

To compare baseline characteristics, clinical recovery and transvaginal ultrasound (TVUS) findings between women **with and without a uterine niche at 6–12 weeks after CS.**

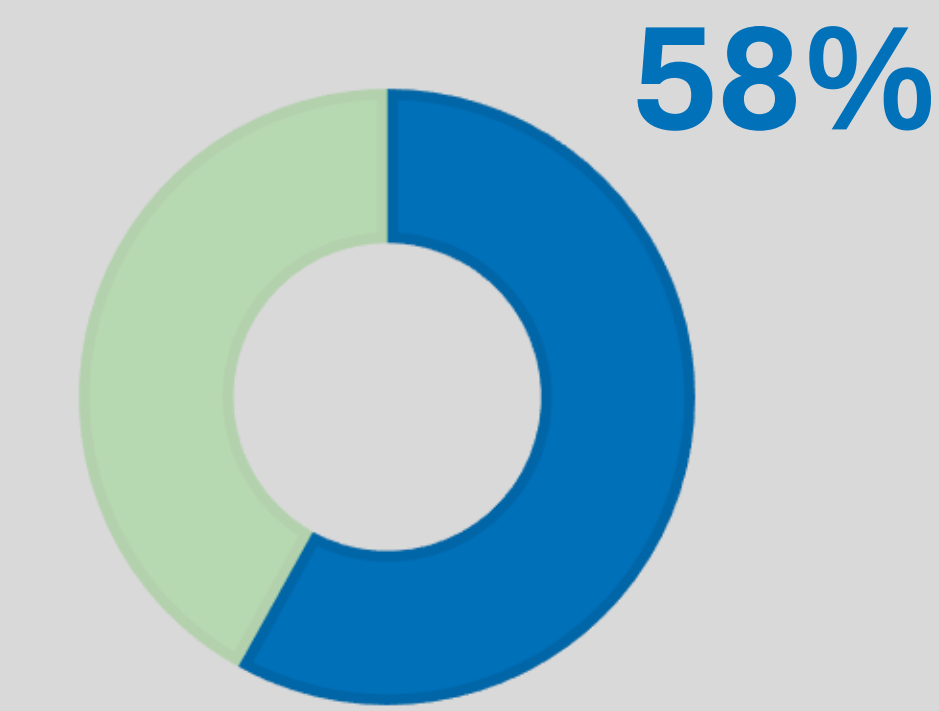
METHODS

Prospective observational study at a tertiary centre.

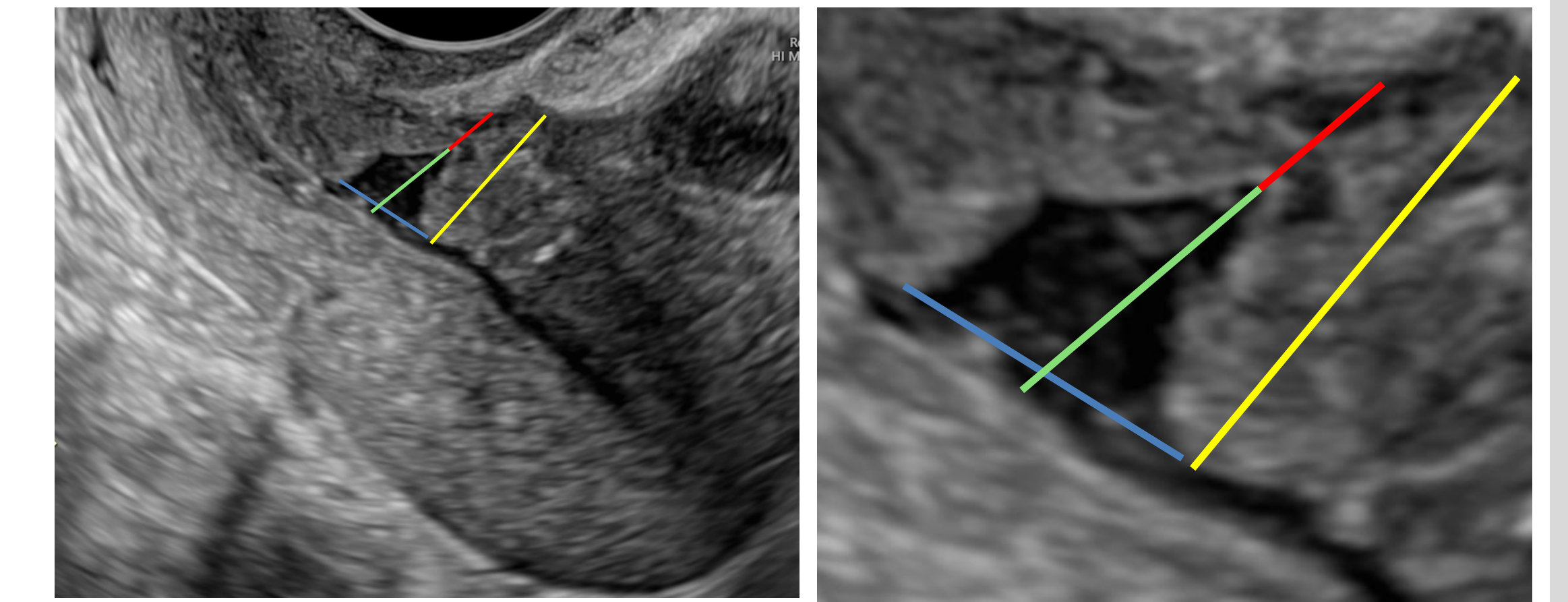


RESULTS

- n=174** included patients → a **niche** was identified in **n=101/174**



- Length
- Depth
- RMT
- AMT



TVUS image. RMT: Residual Myometrial Thickness, AMT: Adjacent Myometrial Thickness.

- Baseline characteristics, CS type and clinical recovery did not differ between groups.**

RECOVERY ASSESSMENT

	Niche (n=101)	No niche (n=73)	p-value
Hospital stay (days)	2.72 ± 1.20	2.60 ± 0.79	0.468
Postpartum bleeding (days)	26.94 ± 13.34	25.26 ± 11.39	0.389
Analgesia use (days)	11.22 ± 8.55	12.06 ± 9.53	0.548

TVUS NICHE PARAMETRES

	Niche (n=101)	No niche (n=73)	p-value
Length (mm)	5.13 ± 2.84	1.40 ± 1.24	<0.001
Depth (mm)	3.99 ± 1.75	0.98 ± 0.71	<0.001
Width (mm)	5.22 ± 3.72	0.88 ± 1.15	<0.001
RMT (mm)	8.55 ± 3.35	11.00 ± 3.82	<0.001
AMT (mm)	13.34 ± 3.68	12.68 ± 3.76	0.255

CONCLUSIONS

At 6–12 weeks post-CS, niches were detected **in more than half of women**, but they had **similar clinical recovery**. Further studies are needed to clarify the clinical relevance of early niche detection.