

# INPLASY PROTOCOL

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**Support:** None.

**Review Stage at time of this submission:** The review has not yet started.

**Conflicts of interest:**  
None declared.

## Oral Intake and Gastrointestinal Function After 2 hours of Cesarean Delivery A Systematic Review and Meta-analysis

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**Review question / Objective:** P (cesarean delivery, cesarean section, abdominal delivery); I (early oral feeding, early feeding, postoperative early feeding, early postoperative feeding, early drinking, early intake water, solid, fluid ); O (gastrointestinal function, gastrointestinal complication, bowel function, bowel activity, bowel mobility, ileus, postoperative complications, nausea, vomiting, hospital stay, discharge, milk secretion, lactation).

**Condition being studied:** Cesarean delivery is an abdominal surgery, and postoperative care in hydration and nutrition is a main concern for women with abdominal surgery. There is controversy about the time of eating after cesarean section.

**INPLASY registration number:** This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 13 February 2023 and was last updated on 13 February 2023 (registration number INPLASY202320055).

### INTRODUCTION

**Review question / Objective:** P (cesarean delivery, cesarean section, abdominal delivery); I (early oral feeding, early feeding, postoperative early feeding, early postoperative feeding, early drinking, early intake water, solid, fluid ); O (gastrointestinal function, gastrointestinal

complication, bowel function, bowel activity, bowel mobility, ileus, postoperative complications, nausea, vomiting, hospital stay, discharge, milk secretion, lactation).

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## **METHODS**

**Participant or population:** Women who underwent cesarean delivery.

**Intervention:** Oral intake after 2 hours of cesarean delivery.

**Comparator:** Oral intake later than 2 hours of cesarean delivery.

**Study designs to be included:** RCT or Non RCT.

**Eligibility criteria:** 1) women recovering from cesarean delivery; 2) early oral intake within 2 hours after cesarean delivery; 3) published in English or Chinese; and 4) study design included randomized controlled trials or nonrandomized trials.

**Information sources:** PubMed, Embase, Google scholar, cochrane, wanfang yixue.

**Main outcome(s):** Outcomes of gastrointestinal function were categorized as: time to return of bowel function (ie, bowel sounds, passing flatus, time to bowel evacuation) and gastrointestinal complications (ie, ileus symptoms, vomiting, nausea, abdominal distention, and diarrhea).

**Additional outcome(s):** Hospital stay, milk secretion.

**Quality assessment / Risk of bias analysis:** Refer to the requirements of Cochrane.

**Strategy of data synthesis:** Two investigators abstracted all the articles using a standardized form, including study title, location of study, study design, sample size, participant characteristics, type of anesthesia, initial time to early oral intake.

**Subgroup analysis:** Type of anesthesia.

**Sensitivity analysis:** Refer to the requirements of Cochrane.

**Country(ies) involved:** China.

**Keywords:** cesarean section, early oral intake, gastrointestinal function, Meta.

## **Contributions of each author:**

Author 1 - shouming chen.

Author 2 - bingchen lang.

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Author 4 - wen'sheng zhang.

Author 5 - shengping zhou.

Author 6 - sipei cheng.