



## P125. LUSTRUM STORY ON LABOUR INDUCTION

Ballal P (IN) [1], REDDY N (IN) [2]

**Context** –Labour induction is an important part of current day obstetrics. Higher incidence of induction and significant increase in elective inductions is reported over the years from Asian countries.

**Objective** – To find out the incidence of labour induction and to study the trends in labour induction with reference to indications, methods used and outcome over a 5 year period.

**Method**–Analysis of the labours induced after 28 weeks of gestation during the period from August 2011 – July 2016 was carried out at a teaching tertiary care maternity hospital run on public-private partnership on the west coast of south India. The trend over the lustrum was noted with respect to the different demographic variables. Details of methods of induction, and maternal and perinatal outcome were studied. Efficacy and safety profile of methods were compared.

**Results**–There were 6250 labour inductions, (22.4% of 27,880 deliveries) during the 5 year study period. Induction rates remained nearly constant (20.9%-23.9%) over this lustrum. Inductions were considered more often in preterm (9.1%) and early term pregnancies (86.6%) and the majority of indications were for hypertensive disorders (17%). Increasing number of inductions were advised for prelabour rupture of membranes, oligohydramnios and gestational diabetes. Practice of induction in Rhesus isoimmunisation showed declining trend. Inductions carried out at term and late term pregnancies showed a decline (from 61.1% to 50.9%).

Elective inductions were carried out in 50% of women and the trend showed a decline (50%-46%).

No significant change in the rate of complications or conversion to caesarean deliveries were noted. Observation about caesarean deliveries revealed that: non-reassuring foetal heart status was the most common indication (36%); declining trend for meconium stained amniotic fluid as the sole marker of foetal stress (19.7% - 10.9%); and upward swing

for cervical dystocia (3.6%-10.2%;  $r=$ ). There was significant increase in the admission of neonates to intensive care unit (4.6%-11.4%) mostly for preterm care

Dinoprostone (54%) and misoprostol (45%) were the most chosen methods for induction. Although induction-delivery interval and caesarean rates seem to be similar with both, better pregnancy outcomes were noted with dinoprostone. Higher incidence of uterine hyper stimulation was seen with misoprostol (16.2 Vs 9.4%) in dinoprostone.

**Conclusion** – Rate of induction was almost constant over the lustrum. Elective induction rate was high

[1] KMC Mangalore ,Manipal university , [2] KMC Mangalore , Manipal university

however ,showing a declining trend, with no change in caesarean delivery frequency. Post-term pregnancy as indication showed decline. Dinoprostone and misoprostol were commonly used methods. Occurrence of uterine hyper-stimulation was higher with misoprostol use.