

Fetomaternal outcomes with the use of balloon catheter in Induction of Labour

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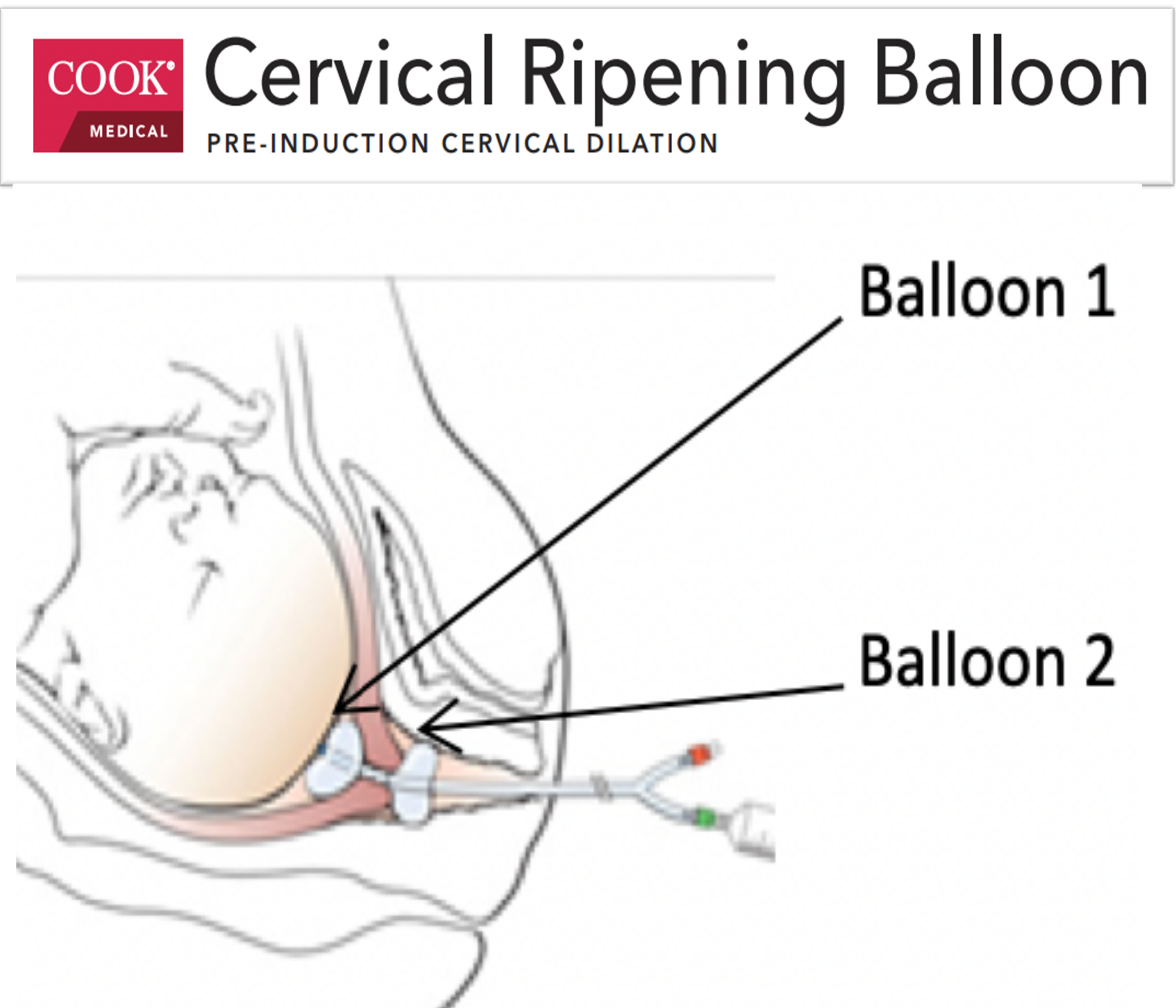
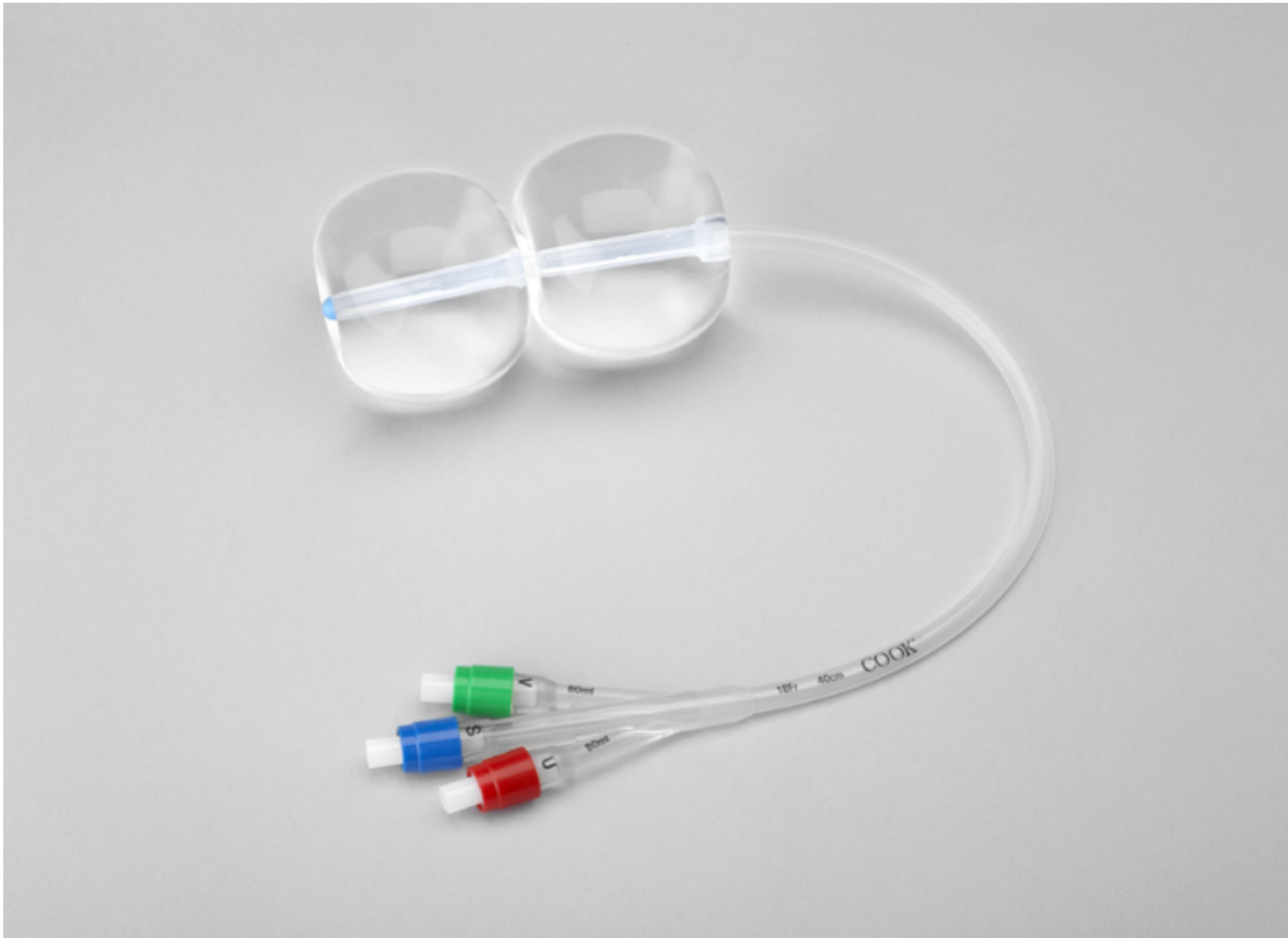
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Introduction:

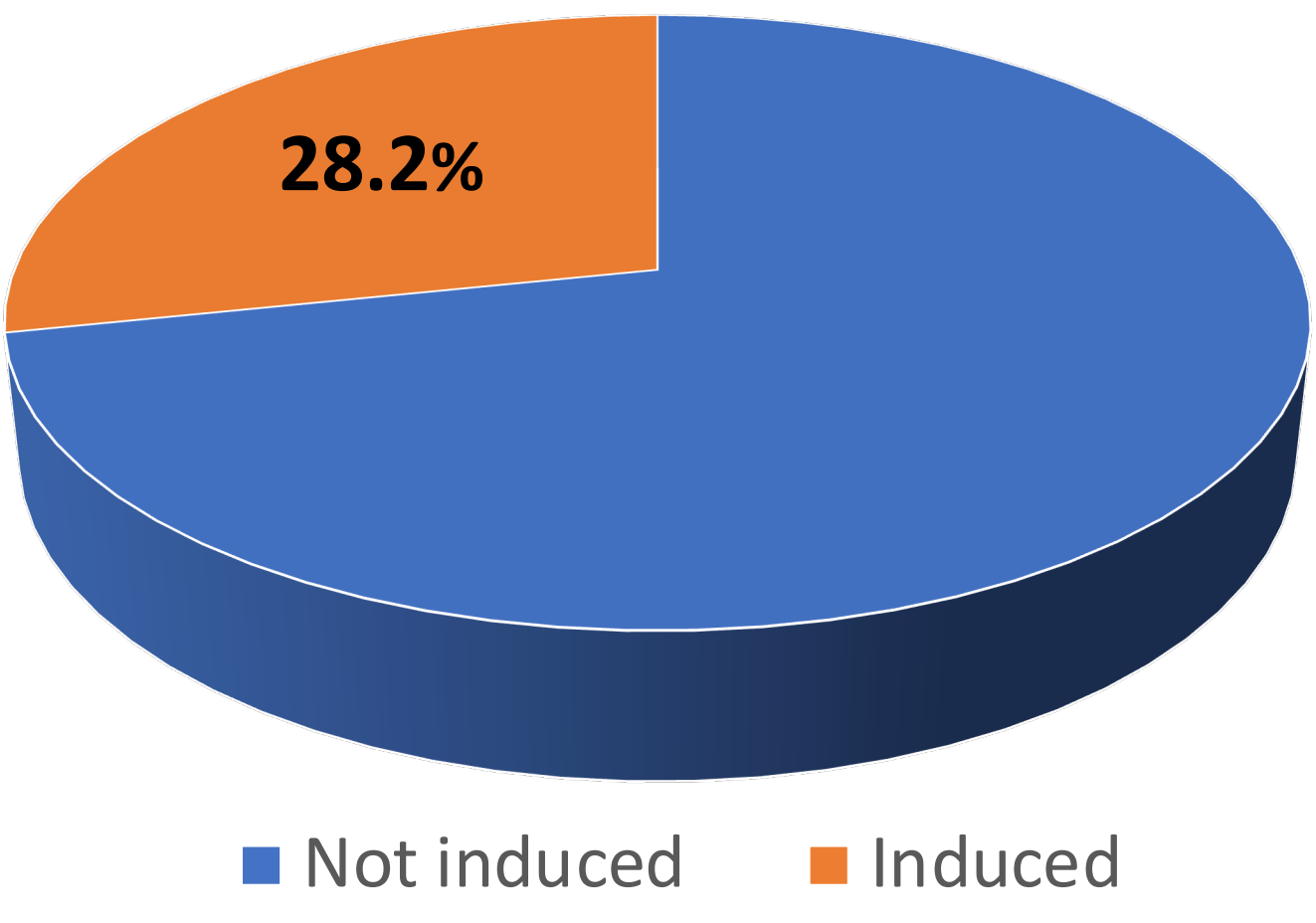
Evidence has shown that balloon catheters are as effective as prostaglandins (PGE) in achieving vaginal delivery, with lower rates of uterine hyperstimulation, Caesarean section and infection rates.¹ One in five women undergo induction of labour (IOL) in the UK. Balloon catheter provides a safe and efficacious alternative to PGE in women keen for VBAC. Data regarding balloon use in maternity units is limited. The primary objective of our study was to determine the IOL trend in our hospital, review the success of induction and assess the safety profile for double balloon catheter during IOL.

Methodology:

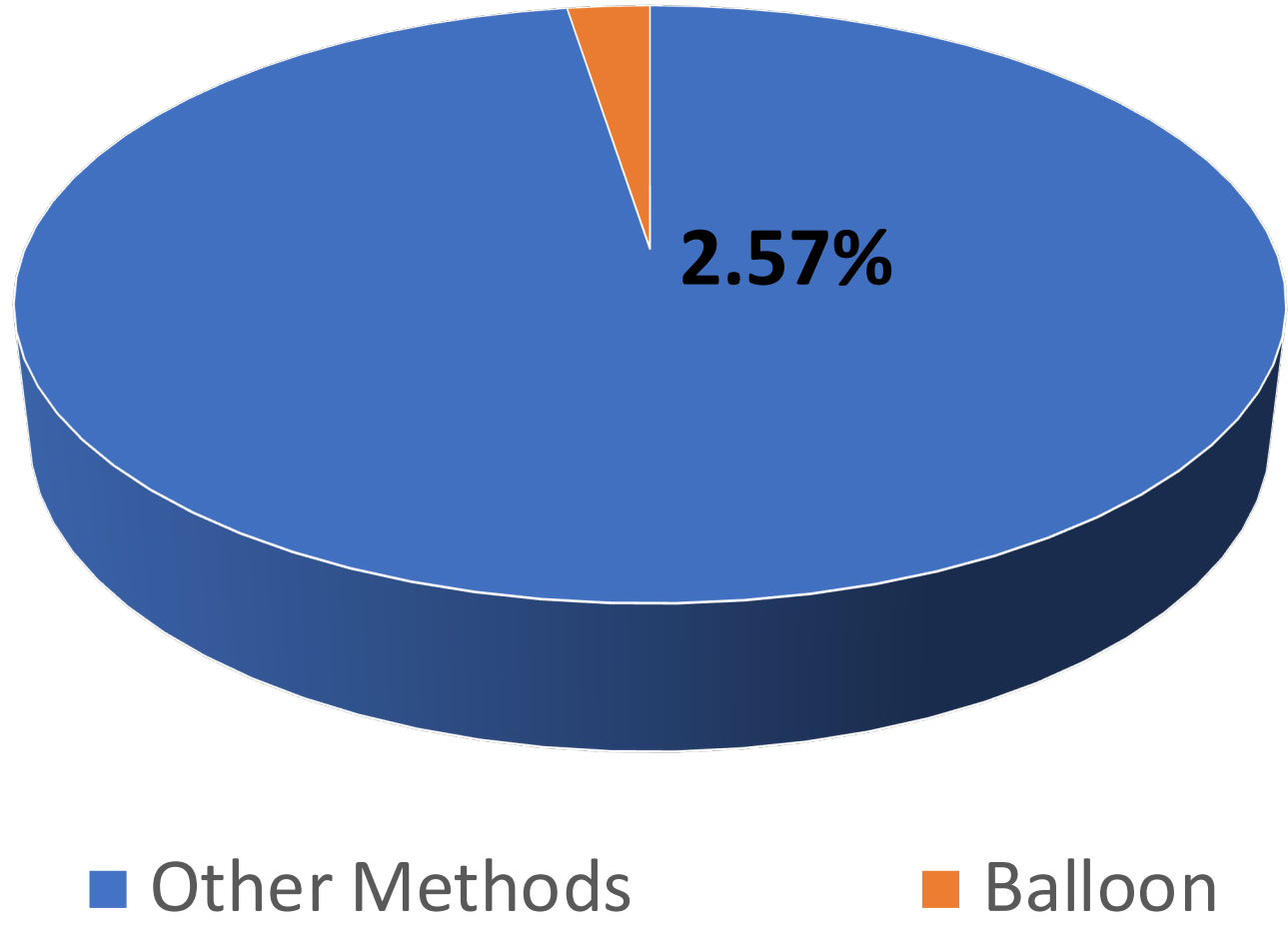
A retrospective cohort study from January 2018 to February 2021 was conducted on women requiring IOL at Hywel Dda Health Board. The rationale behind this was to determine the IOL trends in our health board and eventually assess the success of double balloon catheter use. All the women with balloon induction as primary or secondary method were identified. Data was collected according to the proforma, parameters were analysed and compared to the standards.



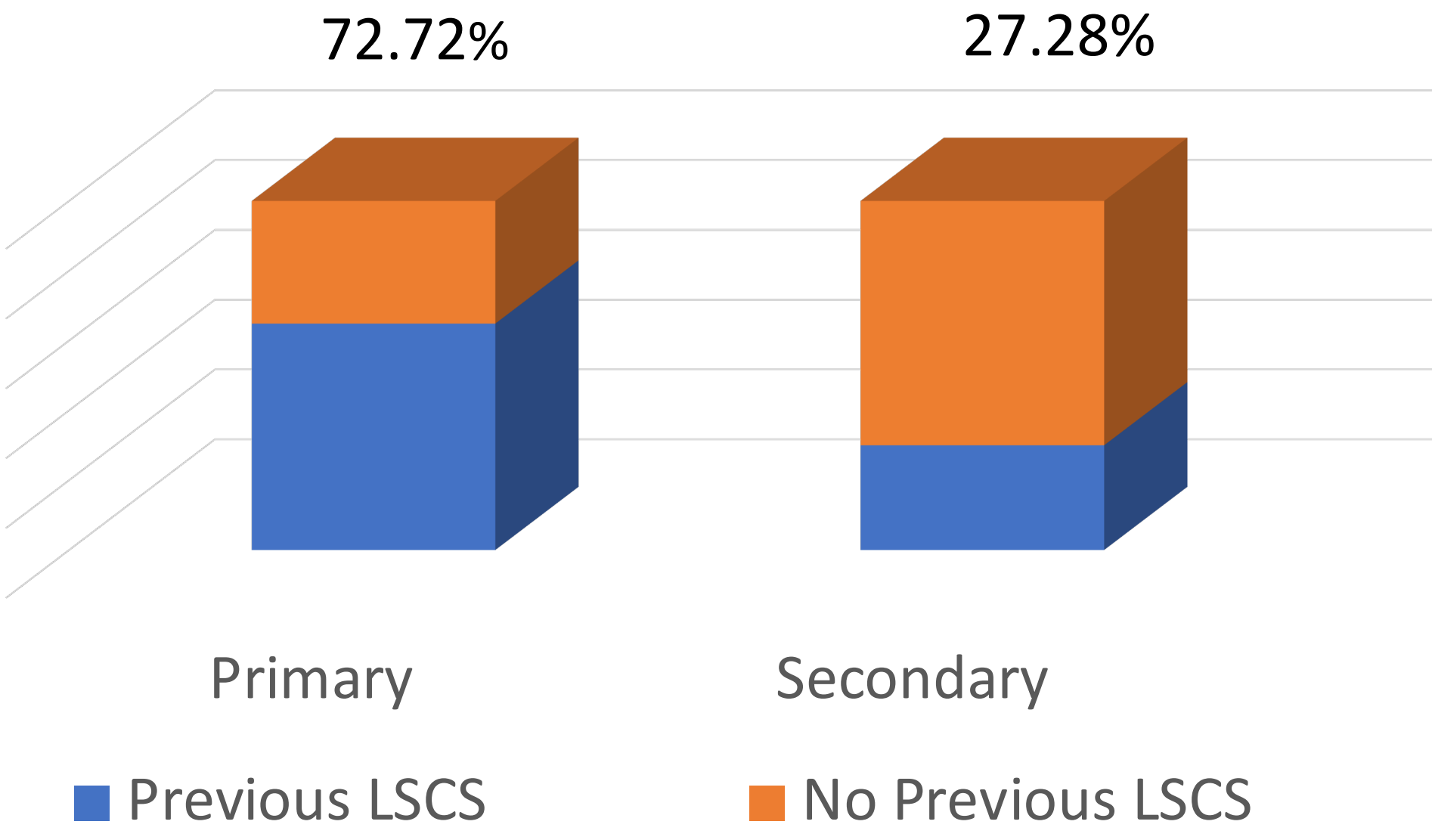
Results:



Rate of IOL (Success Rate 95.92%)

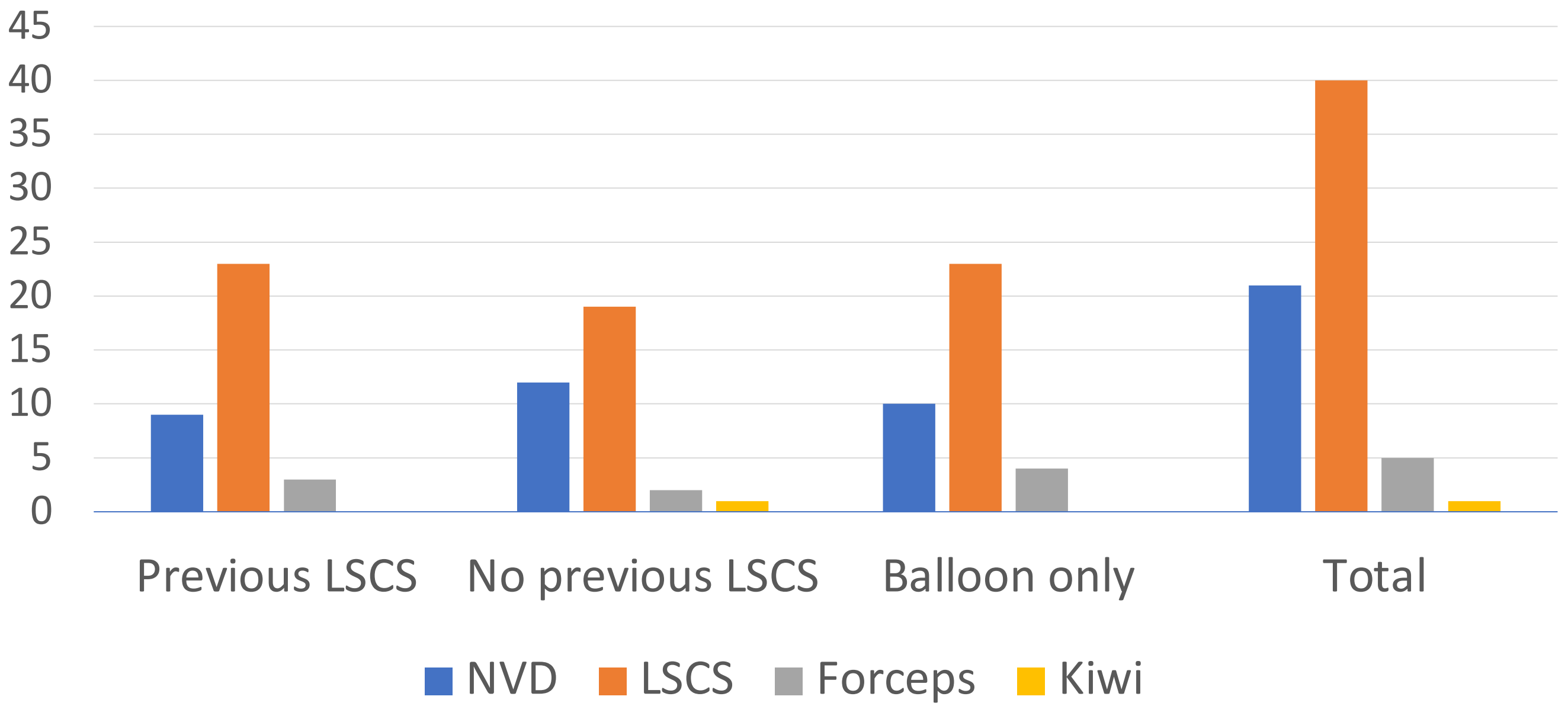


Rate of Balloon Induction



Balloon as the primary method of induction

MATERNAL COMPLICATIONS		FETAL COMPLICATIONS	
PPH >1 L	19.4 %	Low APGAR	2.98%
Hyperstimulation	0%	Readmit	1.4%
Abruptio Placenta	2.98%	IUFD	1.4%



Comparison of mode of delivery following Balloon Induction

Conclusion:

The induction rate in our hospital was higher than standards set by NICE guidelines. Ripening success rates and fetomaternal safety profile in our cohort indicate that Cooks ripening balloon (CRB) catheter is a safe and efficacious method for induction. This study explored the key clinical outcomes of efficacy and safety of the CRB as a method of IOL. The CRB was found to be equally acceptable when compared with PGE as a method of IOL among patients in a Welsh district general hospital setting. We recommend randomised control trials and meta-analysis into balloon use for women with previous caesarean section as future research.

References:

1. Sheri Ee-lin Lim, Toh Lick Tan, Grace Yang Huang Ng, M, Shephali Tagore, Ei Ei Phyo Kyaw, George Seow Heong Yeo. Patient satisfaction with the cervical ripening balloon as a method for induction of labour: a randomised controlled trial. Singapore Med J 2018; 59(8): 419-424.