

Objective

To assess indications for, and outcomes of, induction of labour (IOL) in patients at a district general hospital.

Design:

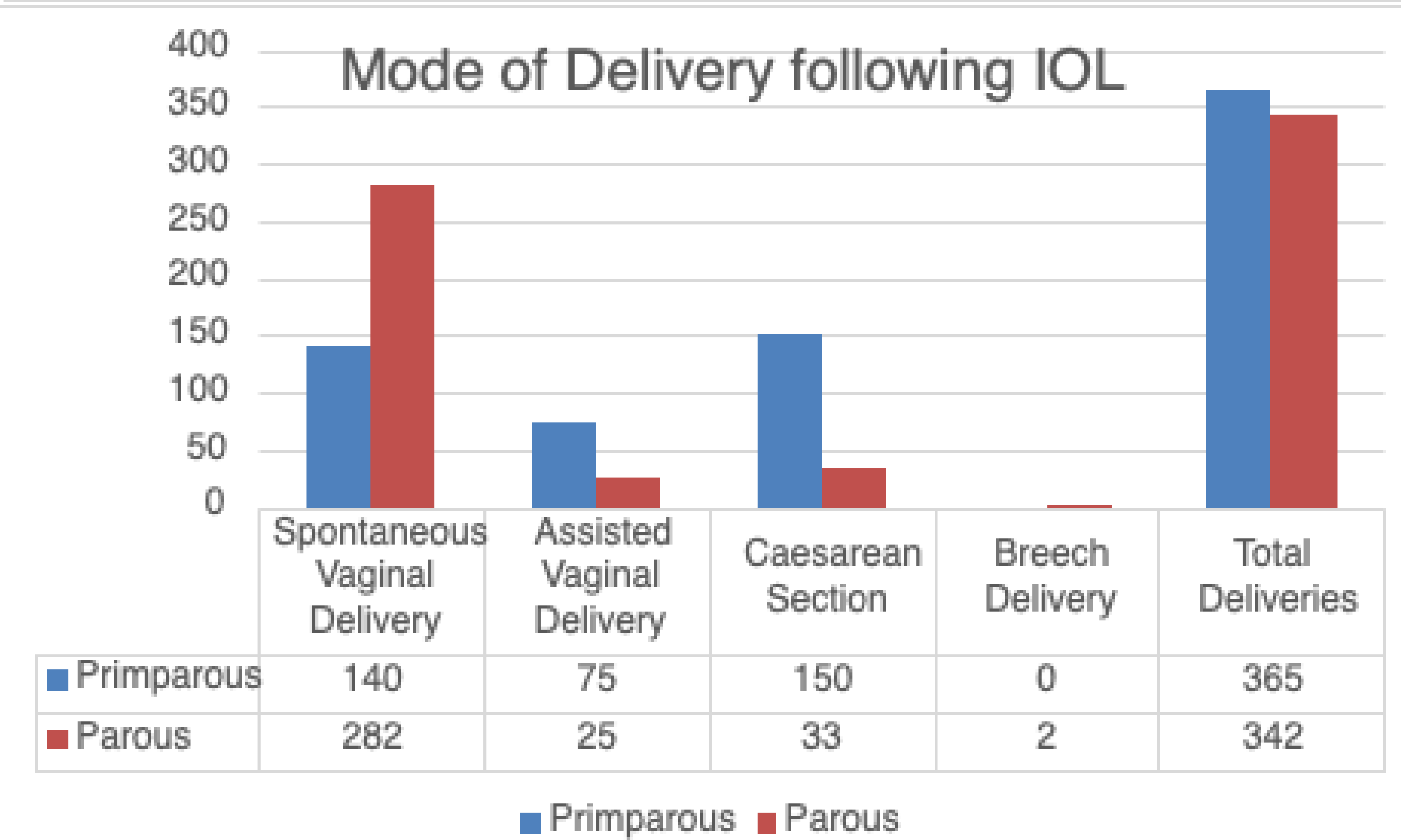
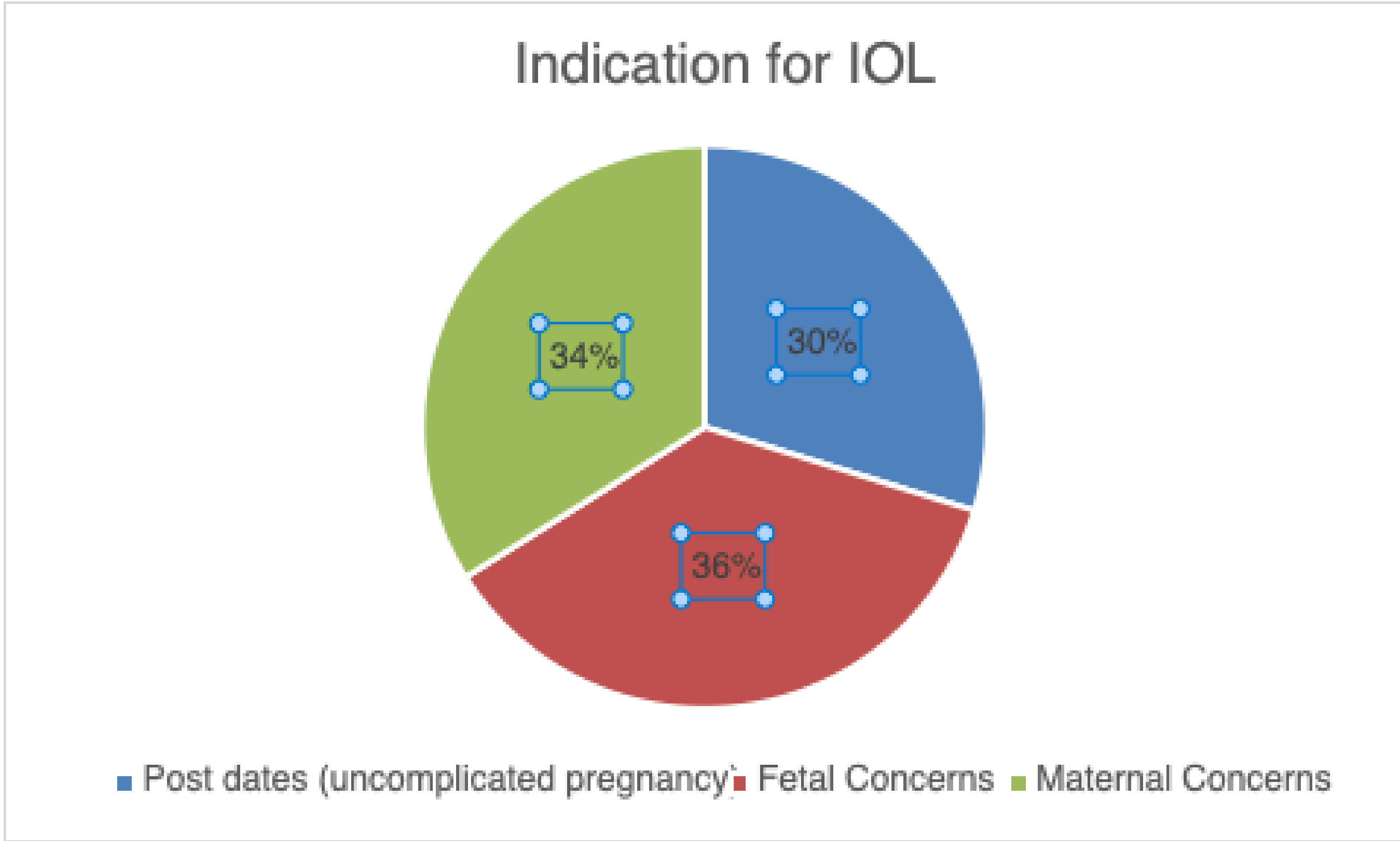
A retrospective review of records for all inductions in patients in a district general hospital over a nine-month period.

Method:

- Data was gathered from electronic maternity records for all patients undergoing IOL between September 1st 2021 and May 31st 2022.
- In total the search identified 705 women whose labour was induced
- Data was collected on the following areas: indication for induction; gestational age; method of induction; mode of delivery; epidural use; third-degree tear rate; and blood loss.
- Chi-squared analysis was performed to compare groups according to method of induction.

Results:

- 705 women from 1994 deliveries (35.35%) had their labour induced.



- Post Partum Haemorrhage (Bloods loss of 1000mls or more) occurred in 4.4% of patients but was significantly raised in the primigravidas being induced (18.3%) compared to parous patients (2.3%)

Discussion:

- This study used data from one maternity unit and therefore is subject to selection bias, however findings are in keeping with the increased rate of birth interventions seen in IOL nationally.
- The IOL is in keeping with the national average of 34%
- The emergency Caesarean section rate (26.6%) is increased compared to the national rate of 18%

Conclusions:

- IOL appears to significantly increase the risk of operative birth in both primiparous and parous women.
- This study adds to the literature on delivery outcomes following IOL. Further research is required to assess whether such findings apply at a population level.