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Introduction

There are rising rates for Induction of labour(IOL) in many maternity units. The study was designed to analyse what factors could influence using one method rather than additional methods for IOL.

Objective

Analyse the factors that lead to a single method for IOL compared to the addition of another method.

Methodology

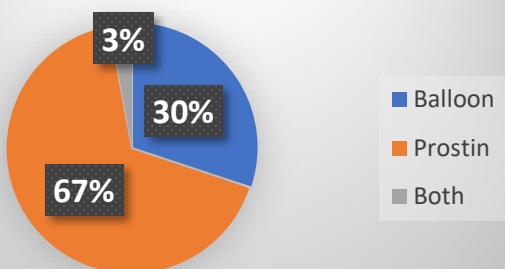
Retrospective cohort study at Royal Brisbane and Women s Hospital, Queensland, Australia, between 2012 to 2021. All women who had undergone IOL either with Prostin, Balloon catheter or a combination of both included.

All other methods of IOL were excluded.

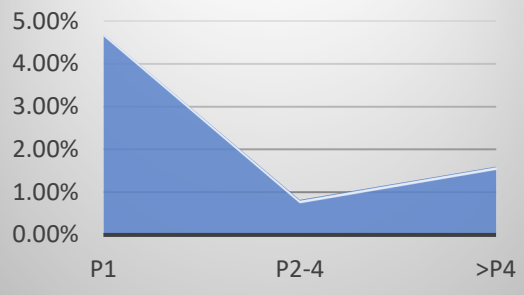
Results

A total of 6099 patients (13.6%) were induced during the study period. Mother's age did not influence the methods of IOL.

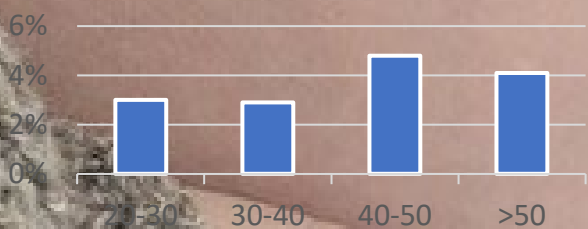
IOL Methods



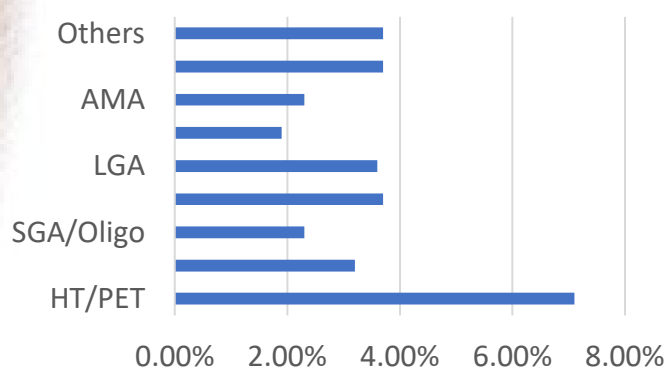
Parity



BMI and use of both methods for IOL



Indications for IOL and use of both methods for IOL



Gestational age at IOL and use of both methods for IOL



- There was no difference among different ethnic differences and the use of two IOL methods

Conclusions

Nulliparity, BMI ≥ 40 , and hypertensive disorders would lead to a combination of the use of two methods for IOL.

References

Vaknin Z, Kurzweil Y, Sherman D. Foley catheter balloon vs locally applied prostaglandins for cervical ripening and labor induction: a systematic review and meta-analysis. Am J Obstet Gynecol 2010; 203:418.
de Vaan MD, Ten Eikelder ML, Jozwiak M, et al. Mechanical methods for induction of labour. Cochrane Database Syst Rev 2023; 3:CD001233.
ACOG Committee on Practice Bulletins -- Obstetrics. ACOG Practice Bulletin No. 107: Induction of labor. Obstet Gynecol 2009; 114:386. Reaffirmed 2020.