

Clinical opinion published on use of maternal oxygen during labor

February 20 2014

When a fetal heartbeat pattern becomes irregular during labor, many practitioners give oxygen to the mother. But questions remain whether this oxygen supplementation benefits the fetus or may actually be potentially harmful.

A clinical opinion written by third year resident Maureen Hamel, MD, along with maternal-fetal medicine specialists Brenna Anderson, MD and Dwight Rouse, MD, of the Department of Obstetrics and Gynecology at Women & Infants Hospital of Rhode Island and The Warren Alpert Medical School of Brown University, has been published in the January 10, 2014 online edition of the *American Journal of Obstetrics & Gynecology*.

The manuscript, entitled "Oxygen for intrauterine resuscitation: Of unproved benefit and potentially harmful," aimed to make recommendations about the safety of the use of maternal oxygen supplementation in laboring women.

According to lead author Dr. Hamel, "Maternal oxygen is often given to laboring women to improve fetal metabolic status or in an attempt to alleviate non-reassuring fetal heart rate patterns. However, there are only two randomized trials investigating the use of maternal oxygen supplementation in laboring women. These studies did not find that supplementation is likely to benefit the [fetus](#) and may even be harmful."

Based on their research, the team concludes that until it is studied

properly in a randomized clinical trial, maternal oxygen supplementation in labor should be reserved for maternal hypoxia (lack of oxygen) and should not be considered an indicated intervention for non-reassuring fetal status.

Provided by Women & Infants Hospital

Citation: Clinical opinion published on use of maternal oxygen during labor (2014, February 20)
retrieved 19 April 2024 from

<https://medicalxpress.com/news/2014-02-clinical-opinion-published-maternal-oxygen.html>

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