

# Giving women more choice when inducing labour

June 26 2014, by David Ellis

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(Medical Xpress)—New research suggests that if given the choice, pregnant women who are due to have their labour induced would prefer to go home than stay in hospital overnight.

The study, led by researchers at the Women's and Children's Hospital and the University of Adelaide, is the largest of its kind, comparing 800 [women](#) who either stayed in [hospital](#) (inpatients) or went home (outpatients) after being given hormonal compounds to prime them for labour.

All of the women were at low risk, over 40 weeks of pregnancy, and were scheduled for labour induction.

The results of the study, published recently in *BJOG: An International Journal of Obstetrics and Gynaecology*, showed there was no real difference in the clinical outcomes of both groups.

"There was no obvious clinical advantage or disadvantage in one group over the other, which is to say that the outcomes for both baby and mother were very similar," says lead author Dr Chris Wilkinson, Director of Maternal Fetal Medicine at the Women's and Children's Hospital and Clinical Senior Lecturer with the University of Adelaide.

"This in itself is an interesting result, but what it suggests is that women in the outpatient group received no disadvantage at having gone home for the night, compared with those women who received overnight

hospital attention.

"In fact, our surveys showed that the women who were given the opportunity to spend a night at home reported greater satisfaction than those who stayed in hospital. We believe this is due to the psychosocial effect of being in a more familiar environment, such as being able to sleep in their own beds.

"There was also support for this practice among the midwives we surveyed," Dr Wilkinson says.

Currently there is no formal outpatient program involving priming for induced labour in Australian hospitals.

Dr Wilkinson says having an outpatient program could result in some cost savings for hospitals and improved wellbeing for pregnant mothers.

"Although the number of women eligible for such a program would be in the minority, providing them with an informed choice would be in keeping with offering quality, women-centred care," he says.

**More information:** Wilkinson C, Bryce R, Adelson P, Turnbull D. "A randomised controlled trial of outpatient compared with inpatient cervical ripening with prostaglandin E2 (OPRA study)." *BJOG* 2014; DOI: [10.1111/1471-0528.12846](https://doi.org/10.1111/1471-0528.12846).

Provided by University of Adelaide

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