Fetal decent and maternal feedback substantially shortens second stage labor

February 2 2015

In a study to be presented on Feb. 5 in an oral concurrent session at the Society for Maternal-Fetal Medicine's annual meeting, The Pregnancy Meeting, in San Diego, researchers will report that the use of a system that provides precise measurement of fetal decent and maternal feedback during second stage labor substantially shortens second stage and improves outcomes.

Epidurals are commonly used for labor pain relief but the reduced maternal sensation impedes pushing efficacy during second stage labor. Long second stage labor is associated with adverse outcomes. The study assessed the clinical impact of providing laboring women real-time audiovisual feedback regarding fetal decent in second stage labor.

The study, titled Optimizing Second Stage Outcomes: A Randomized Controlled Trial Assessing the Ability of Precise Maternal Feedback to Reduce Adverse Perinatal Outcome, took 69 first-time pregnant women receiving epidural anesthesia and attached a biofeedback device detecting fetal decent. Forty-five women in the study were provided audiovisual feedback. The median push time for those women using feedback was 58 minutes versus 77 minutes for those without.

"We now know that use of this feedback system improves maternal pushing increasing the chances of a spontaneous vaginal delivery and decreasing key adverse maternal outcomes such as perineal trauma. The system also decreases neonatal intensive care admissions," explained Bardett Fausett, M.D. Dr. Fausett is one of the researchers for this study

from Women's and Children's Hospital, in Lafayette, Louisiana.

Provided by Society for Maternal-Fetal Medicine