

Shoulder dystocia maneuvers not tied to neonatal harm

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(HealthDay)—A variety of shoulder dystocia maneuvers are not associated with neonatal morbidity after adjusting for duration, according to a study published in the March issue of the *American Journal of Obstetrics and Gynecology*.

Janine E. Spain, M.D., from the Washington University School of Medicine in St. Louis, and colleagues retrospectively reviewed all cases (2005 through 2008) in a [retrospective cohort study](#) of women who experienced a clinically diagnosed shoulder dystocia at term requiring obstetric maneuvers. A reference group of women delivered by McRoberts/suprapubic pressure only (135 women) was compared to women exposed to Rubin [maneuver](#) (83 women), Wood's screw maneuver (53 women), or delivery of the posterior arm (36 women).

After adjusting for nulliparity and duration of shoulder dystocia, the

researchers found that individual maneuvers were not associated with composite morbidity, neonatal injury (clavicular or humeral fracture or brachial plexus injury), or neonatal depression (defined as Apgar

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