

Study finds glucose supplementation significantly reduces length of induced labor

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A study in the *American Journal of Obstetrics & Gynecology* finds that simple glucose supplementation reduces length of induced labor. The study (currently available online as an Article in Press, in advance of the May issue of the Journal), was initially presented two weeks ago at the Society for Maternal-Fetal Medicine's annual meeting, The Pregnancy Meeting. The study, "Reduction of total labor length through the addition of parenteral dextrose solution in induction of labor in nulliparous: results of DEXTRONS prospective randomized controlled trial," was conducted by researchers with the Université de Sherbrooke in Sherbrooke, Quebec, Canada. The study investigated the use of glucose to shorten induced labor in nulliparous (first time giving birth). The primary outcome studied was the total length of active labor.

Prolonged [labor](#) can be harmful to maternal and fetal health. Few medical interventions are known to shorten labor duration. Because muscle performance is known to be improved by glucose supplementation, the researchers tested whether adding glucose to the intravenous hydration solution women receive during labor could accelerate labor. Two hundred pregnant women were randomly assigned to receive either a standard hydration solution containing salt and water or a solution containing glucose, salt and water.

Josianne Pare, M.D., with the Department of Obstetrics & Gynecology at the University of Sherbrooke and the presenter of the research at the SMFM annual meeting, explained, "We found that the median duration of labor was 76 minutes shorter in the group of women receiving

glucose. There was no difference in the mode of delivery (cesarean section, forceps, etc.), or the neonatal well-being measures." Pare continued, "Glucose supplementation therefore significantly reduces the total length of labor without increasing the rate of complication. This is great news for women experiencing induced labor."

The researchers concluded that, given the low-cost and safety of this intervention, [glucose](#) should be the solute of choice during labor.

More information: The online Article in Press in the Journal is available at [www.ajog.org/article/S0002-9378\(17\)30117-5/pdf](http://www.ajog.org/article/S0002-9378(17)30117-5/pdf)

Provided by Society for Maternal-Fetal Medicine

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