

Induction for late-term pregnancies at 41 weeks tied to small benefits

15 March 2019



(HealthDay)—There may be a small benefit to labor induction in low-risk woman at 41 weeks versus expectant management, though the chances of a good perinatal outcome are high with both strategies, according to a study published online Feb. 20 in *The BMJ*.

Judit K.J. Keulen, from the University of Amsterdam, and colleagues examined a composite of perinatal mortality and neonatal morbidity outcomes for low-risk [women](#) randomly assigned to [induction of labor](#) at 41 weeks (900 women) or expectant management until 42 weeks (901 women). The women had uncomplicated singleton pregnancies and were seen at 123 primary care midwifery practices and 45 hospitals (secondary care) in the Netherlands from 2012 through 2016.

The researchers found adverse perinatal outcomes in 1.7 percent of women in the induction group versus 3.1 percent in the expectant management group ($P = 0.22$ for noninferiority). In the induction group, 11 infants had an Apgar score

APA citation: Induction for late-term pregnancies at 41 weeks tied to small benefits (2019, March 15)
retrieved 24 May 2019 from <https://medicalxpress.com/news/2019-03-induction-late-term-pregnancies-weeks-tied.html>

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