

ABSTRACT

AGGRESSIVE AND EXPECTANT MANAGEMENT OF LABOUR

Introduction An aggressive protocol using a single (alert) line partogram and an expectant protocol using a two line (alert line and action line) partogram have been described for the management of labour.

Objective: To compare the aggressive and expectant protocols in the management of labour in uncomplicated singleton primigravidae at a gestation of 37 weeks or more.

Design and setting: A prospective interventional study carried out at Teaching hospital Mahamodara, Galle

Method: Three hundred primigravidae were allocated to either the aggressive (n=150) or the expectant (n=150) management protocol. In the aggressive management, assessments and vaginal examinations were carried out two hourly, and oxytocin infusion commenced if cervical dilatation moved to the right of the alert line. In the expectant management, assessments and vaginal examinations were carried out four hourly and oxytocin infusion was commenced when the action line was reached or crossed. The women were reassessed two hourly thereafter.

Outcome measures: Use of oxytocin, duration of labour, mode of delivery, and Apgar scores at 1,5 and 10 minutes

Results: The two groups were similar with respect to maternal age, period of gestation and cervical dilatation at recruitment to the study. A markedly higher number of women received oxytocin (75% vs 38 %, $p=0.02$) and more women required a Caesarean delivery (6 vs 2, $p=0.03$) in the aggressive management group compared to the expectant group. However there were no significant differences with respect to duration of labour and Apgar scores at 1,5 and 10 minutes.

Conclusion: Compared to the conservative protocol the aggressive protocol resulted in an increased use of oxytocin and increased Caesarean delivery rates. However the neonatal outcome was similar in the two protocols.