ABSTRACT

Introduction:

Induction of labour (IOL) with unripe cervix leads to bad out come and is a major problem in obstetric practice.

Objective:

To compare the effectiveness of ISMN (Isosorbide Mononitrate) vs. Foley catheter for pre-induction cervical ripening.

Design and setting:

Double blind randomized controlled trial at teaching hospital, Mahamodara.

Method:

One hundred and twenty six primigravidae with singleton pregnancy in whom a decision had been taken to induce labour between 38-41 weeks of gestation. They were randomly allocated to receive either ISMN 60mg SR intra vaginally (n=66) or Foley catheter intra cervically (n=60) to ripen the cervix as they had modified Bishop' score ≤ 5.

Main outcome measures:

Change in modified Bishop's score, Induction delivery interval, Caesarean section rates and Apgar score ≤ 7 at 5 min of birth.

Results:

There was no significant difference in age, period of gestation, mean modify Bishop's score, before IOL between two groups. There was a significant increase in the mean modified Bishop's score in the Foley group (6.3 SD =2) compared to the ISMN (4.2 SD = 2.4) ($p \leq 0.01$).

There was no difference in the induction delivery interval, Caesarean section rate, and the proportion of babies with Apgar score ≤7 at 5min in both groups.

Conclusion:

Intra cervical Foley catheter is better than intra vaginal ISMN for pre-induction cervical ripening.