



Foley balloon plus saline expedites vaginal delivery

Source: *Obstetrics & Gynecology* 2006; 107: 234-9

Comparing the time between labor induction and delivery with and without infusion of extra-amniotic saline.

Using a Foley balloon with extra-amniotic saline infusion shortens the delay between induction and delivery, without increasing cesarean rates, US researchers report.

Their finding comes from a randomized study in which 140 women presenting for induction of labor were assigned to receive Foley alone or Foley with extra-amniotic saline infusion.

"It is possible that the addition of extra-amniotic saline may alter the mechanics of cervical ripening," the authors explain. "The constant infusion could increase prostaglandin release, thereby shortening labor time."

Their results showed that the time from induction to vaginal delivery was 16.58 hours in the saline infusion group versus 21.47 hours in controls.

Furthermore, saline infusion was associated with a significantly lower rate of chorioamnionitis (6.1 percent vs 16.2 percent), allaying fears that the extra fluid might contaminate the choriodecidual space with vaginal flora.

There was no difference between the methods with respect to cesarean rates (21.2 percent vs 20.1 percent) or the infant's Apgar scores; adverse events were rare and unrelated to the method of induction.

Nicole Karjane (Virginia Commonwealth University, Richmond) and colleagues conclude: "Extra-amniotic saline infusion through a transcervical Foley catheter at 40 ml/hour should be strongly considered for induction of labor in patients with an unfavorable cervix."

Posted: 23 February 2006