

Delayed pushing linked to longer second stage of labor

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(HealthDay)—For nulliparous women, delayed pushing is associated

with longer second stage duration and increased odds of cesarean delivery and postpartum hemorrhage, according to a study published in the November issue of *Obstetrics & Gynecology*.

Lynn M. Yee, M.D., M.P.H., from the Northwestern University in Chicago, and colleagues reviewed data from 21,034 [nulliparous women](#) with singleton, cephalic, nonanomalous term births who achieved 10-cm cervical dilation. Outcomes were compared for women in whom pushing was delayed by 60 minutes or more (delayed group; 18.4 percent of the women) and those who initiated pushing within 30 minutes (early group).

The researchers found that delayed pushing was more likely among women who were older, privately insured, or non-Hispanic whites, as well as those who had induction or augmentation of labor, diabetes, or epidural analgesia. Women in the delayed group had longer mean durations of the second stage (P postpartum hemorrhage, and blood transfusion (adjusted odds ratios, 1.86, 1.26, 1.43, and 1.51, respectively). Compared with early pushing, delayed pushing was not associated with increased odds of adverse neonatal outcomes.

"These data from a large, contemporary, diverse cohort call attention to the potential risks associated with delayed pushing in the nullipara," the authors write.

More information: [Full Text \(subscription or payment may be required\)](#)

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