

# Rotational instrument delivery OK for fetal malposition

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(HealthDay)—Neonatal outcomes are no worse with rotational instrumental delivery than with cesarean delivery for persistent fetal malposition, according to a study published in the March issue of the *American Journal of Obstetrics & Gynecology*.

Abigail R. Aiken, M.B./B.Chir., Ph.D., M.P.H., from Princeton University in New Jersey, and colleagues assessed the factors associated with selection of rotational instrumental versus cesarean delivery to manage persistent fetal malposition among 868 women in the United Kingdom with vertex-presenting, single, liveborn infants at term with persistent malposition in the second stage of labor.

The researchers found that increased likelihood of rotational instrumental delivery was associated with lower maternal age (odds ratio [OR], 0.95), lower body mass index (OR, 0.94), lower birth weight (OR,

0.95), no evidence of fetal compromise at the time of delivery (OR, 0.31), delivery during the daytime (OR, 1.45), and delivery by a more experienced obstetrician (OR, 7.21). There was no difference by delivery method in the rates of delayed neonatal respiration, reported critical incidents, or low fetal arterial pH based on propensity score stratification.

"More widespread training of obstetricians in rotational instrumental delivery should be considered, particularly in light of rising cesarean delivery rates," the authors write.

**More information:** [Abstract](#)  
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