

Higher doses of oxytocin do not reduce the use of caesarean sections

29 January 2019

Delayed labor increases the risk of a caesarean section, even among women who receive oxytocin for augmentation of labour. The rate of caesarean section among first-time mothers is not reduced if the administered dose is doubled either, according to a dissertation from Sahlgrenska Academy at the University of Gothenburg, Sweden.

In her dissertation Lotta Selin, a midwife, studied data on a total of 2,775 births in Sweden. She has focused on the risk and outcomes of delayed labor and how augmentation of [labour](#) with [oxytocin](#) is managed.

"Other methods of treatment need to be explored more, such as dosages of oxytocin adapted to specific groups of women and methods applied during labour that can stimulate the body's own production of the oxytocin hormone," says Lotta Selin.

Delayed labor is common among first-time mothers, which may lead to a [caesarean section](#) and a negative birth experience. In the material studied, the rate of emergency [cesarean section](#) among first-time mothers with delayed labour was 17.1 percent compared with 2.3 percent for women in the group with a normal progress.

A higher dose of oxytocin, compared with the dose routinely administered today, did not reduce the rate of caesarean section nor did it affect the birth experience. On the other hand, labour was shortened by an average of 23 minutes. No other differences could be demonstrated.

Use and abuse

In [health care](#) in Sweden, it is common to administer synthetic oxytocin as an intravenous drip for augmentation of labour. According to the dissertation, however, there was substantial overuse and misuse of oxytocin.

"Women whose labour progress was normal also received augmentation with oxytocin to speed up the progress, a treatment that can stimulate excessively frequent uterine contractions, which in turn can cause fetal distress," Selin points out.

However, when guidelines and controls are carefully followed, i.e. both the woman's contractions and the baby's heart sounds are continuously monitored during administration of oxytocin, no adverse effects on the mother and child has been seen.

Diminished confidence

The fact remains that unnecessary treatment can limit the woman's ability to move freely and in particular diminish her confidence in her own ability to give birth, Selin maintains. Selin has worked as a midwife in obstetric care for 27 years and has conducted research on delayed labour and treatment with oxytocin for 17 years.

More information: Delayed labour – risk factors, use of oxytocin and outcomes.
hdl.handle.net/2077/56333

Provided by University of Gothenburg

APA citation: Higher doses of oxytocin do not reduce the use of caesarean sections (2019, January 29) retrieved 16 September 2022 from <https://medicalxpress.com/news/2019-01-higher-doses-oxytocin-caesarean-sections.html>

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