

Workshop:

Induction of labor – Could and should we put an end to the spontaneous onset of labor?

- *A critical view on 2 new studies with a high impact on guidelines and on clinical practice.*

Target group: Midwives, doctors and students.

Duration: 2 hours

Skills: The workshop requires no research skills

Introduction: Sometimes single studies have a huge impact on changing clinical practice. As an example, The Term Breech Trial by Hannah in 2000, that more or less eliminated planned breech birth in middle- and high income countries. In the aftermath, the study has been under scrutiny. During recent years two trials concerning induction of labor seem to have the same practice-changing ability: The ARRIVE trial (2018) finds induction at 39+0 as a risk-free option, that even reduce the risk of cesarean section. Further, the SWEPIIS trial (2019) finds significantly reduced risk of perinatal death if induction of labour is routinely performed in 41+0 gestational week instead of awaiting another week. Both studies have been under critical examination due to their general impact on various clinical practices and guidelines. The question here to explore: Do these studies provide results, that are useful and transferable to **your own** clinical practice?

Aim: During a mix of short presentations and collaborative groupwork, the aim of this workshop is, that you feel competent for clinical discussions with the offset in the two trials. Are they well conducted? And maybe most importantly: Is it reasonable to believe, that the results will be reproduced if transferred to your practice? Which risks and benefits should be taken into consideration? What other derived consequences may an implementation in clinical practice encounter?

Preparation: It's not necessary, but might qualify the discussions, if the two studies have been overviewed:

Grobman et al (2018) Labor Induction versus Expectant Management in Low-Risk Nulliparous Women. N Engl J Med 2018;379:513-23.

Link: <https://www.nejm.org/doi/pdf/10.1056/NEJMoa1800566?articleTools=true>

Wennerholm (2019) Induction of labour at 41 weeks versus expectant management and induction of labour at 42 weeks (SWEdish Post-term Induction Study, SWEPIIS): multicentre, open label, randomised, superiority trial. BMJ 2019; 367 Link: <https://www.bmj.com/content/367/bmj.l6131>