

Improving Care at Delivery for Women with Preeclampsia Comparing the Foley Balloon Catheter with Oral Misoprostol

Every year between 60,000 and 80,000 pregnant women around the world die from preeclampsia and eclampsia. These serious conditions unique to pregnancy and the postpartum period are most often characterized by a rapid rise in blood pressure. If not diagnosed and treated promptly they can lead to seizure, stroke, organ failure, and maternal and infant death. Prompt delivery, preferably vaginally, is vital in order to achieve good outcomes for mother and baby.

While effective care, including treatment with magnesium sulfate and drugs that lower blood pressure, can reduce death and disability associated with preeclampsia, the only definitive cure comes with delivery. Inducing labor is often critical.

Two low-cost methods – oral misoprostol and a Foley balloon catheter* – are already used in some low-resource settings to induce labor. However, to date their relative risks and benefits have been unknown.

[*A fluid-filled balloon device that is inflated in the cervix in order to help open the cervix in preparation for delivery.]

Over 600 women requiring an induced delivery as a result of preeclampsia or high blood pressure consented to take part in a study carried out in two large public hospitals in Nagpur, India. They were assigned at random to receive either oral misoprostol (25mcg every two hours) or a Foley catheter.

Oral Misoprostol Shown to be More Effective

- Oral misoprostol is more effective than a Foley catheter in inducing labor in women with preeclampsia or high blood pressure.
- Women undergoing labor induction with misoprostol had a quicker labor, were less likely to have a caesarian section delivery, and preferred this method over the Foley catheter.
- There was no difference in maternal or neonatal adverse events between the two methods.

The results could prove useful as part of the development of clinical guidelines and recommendations in low-resource settings.

You can read more about the study (available in open access): Foley catheterisation versus oral misoprostol for induction of labour in hypertensive women in India (INFORM): a multicentre, open-label, randomised controlled trial, Mundle et al. The Lancet 2017.

The INFORM trial was carried out between 2013 and 2015 by the University of Liverpool, Gynuity Health Projects, and the Government Medical College, Nagpur.

Gynuity Health Projects is a research and technical assistance organization which works globally to ensure that reproductive and maternal health technologies are widely available at reasonable cost, provided in the context of high-quality services, and offered in a way that recognizes the dignity and autonomy of each individual. Our efforts are focused particularly on resource-poor environments, underserved populations, and challenging subject matter. For further information, visit our website www.gynuity.org and follow us on Twitter [@Gynuity](https://twitter.com/Gynuity).