

**Labor Induction at Thirty-Nine Weeks: Literature Review**

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July 8, 2022

## **Labor Induction at Thirty-Nine Weeks: Literature Review**

Labor and delivery are a process that starts at the beginning of a newborn's life. Safe labor and delivery are the optimal goals for every delivery process. A traditional method of labor and delivery is waiting until forty weeks of pregnancy before utilizing labor induction. Qualitative research on labor installation at thirty-nine weeks can showcase the benefits and adverse outcomes of this nontraditional labor and delivery process. Using qualitative research for a literature review could ultimately help determine if an earlier induction can result in a more optimal labor and delivery process for mother and baby (Sotiriadis et al., 2018).

### **Maternal and perinatal outcomes after elective induction of labor at thirty-nine weeks in uncomplicated singleton pregnancy: a meta-analysis**

This article's authors include A. Sotiriadis, S. Petousis, B. Thilaganathan, F. Figueras, W. P. Martins, A. O. Odibo, K. Dinas, and J. Hyett in the year 2018 (Sotiriadis et al., 2018). The article is a quantitative review of the outcomes of induction of labor at thirty-nine weeks in an uncomplicated pregnancy (Sotiriadis et al., 2018). A single fetus pregnancy is being studied in the article to discover adverse and optimal outcomes (Sotiriadis et al., 2018). Specifically, this study's objective is to determine what early induction could impact the rate of cesarean deliveries (Sotiriadis et al., 2018).

### **Key Points**

The study is qualitative research where participants must be thirty-nine weeks and zero days to thirty-nine weeks and six days with a low-risk single fetus pregnancy that underwent medical

labor induction (Sotiriadis et al., 2018). The authors then compared the participants' maternal death rates, neonatal intensive care unit rates, and cesarean delivery rates to those not labor induced at thirty-nine weeks (Sotiriadis et al., 2018). The collection of data is through database searches (Sotiriadis et al., 2018). The data concludes that there is a lower risk of maternal hypertension, lower cesarean deliveries, and lower neonatal respiratory support with the induction of labor at thirty-nine weeks (Sotiriadis et al., 2018). The data does support a moderate significance that the induction of labor at thirty-nine weeks can lower cesarean deliveries (Sotiriadis et al., 2018). The P-value for this study is 0.01, which leads to the probability that the hypothesis is true (Sotiriadis et al., 2018). The article proposes that labor induction at thirty-nine weeks lowers the risk of c-sections, maternal hypertension, and neonatal respiratory support (Sotiriadis et al., 2018).

### **Assumptions**

The author's assumption of the research article includes providing a more optimal outcome for mother and baby during labor and delivery (Sotiriadis et al., 2018). The article discusses the reduction of maternal hypertension, lower cesarean deliveries, and less need for neonatal respiratory support (Sotiriadis et al., 2018). All these positive outcomes result from the induction of labor at thirty-nine weeks. These positive outcomes can increase the quality of care for both mother and baby during labor and delivery of an uncomplicated single fetus pregnancy (Sotiriadis et al., 2018).

### **Deficit/Conclusion**

This student does believe the authors have moderate evidence that supports the hypothesis that the induction of labor at thirty-nine weeks can result in a more optimal outcome for mother and baby. The implications of this article can result in a safer labor and delivery method. A reduction in cesarean deliveries can result in better maternal outcomes. Lower maternal hypertension rates are optimal for mother and baby. A lower need for neonatal respiratory support results in healthier neonates with a proper respiratory system that does not need outside respiratory support.

### **Second article title here**

Here add in a summary of the article. Follow the MEAL paragraph formatting and use Grammarly.com. Be sure to cover all aspects within the rubric. Be sure to use double space and to tab over for your first line of a new paragraph.

### **Key Points**

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### **Assumptions**

Paragraph goes here discussing the assumptions of the article. Follow the MEAL paragraph formatting and use Grammarly.com.

### **Deficit/Conclusion**

Paragraph goes here discussing the conclusion of the article. Follow the MEAL paragraph formatting and use Grammarly.com. Do you accept the authors' line of reasoning? What are the implications for this article? If nursing fails to accept this line of reasoning, what would the implications be?

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Here add in a summary of the article. Follow the MEAL paragraph formatting and use Grammarly.com. Be sure to cover all aspects within the rubric. Be sure to use double space and to tab over for your first line of a new paragraph.

### **Key Points**

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### **Assumptions**

Paragraph goes here discussing the assumptions of the article. Follow the MEAL paragraph formatting and use Grammarly.com.

### **Deficit/Conclusion**

Paragraph goes here discussing the conclusion of the article. Follow the MEAL paragraph formatting and use Grammarly.com. Do you accept the authors' line of reasoning? What are the implications for this article? If nursing fails to accept this line of reasoning, what would the implications be?

## **Conclusion**

Write a conclusion here in your overall paper. Follow the MEAL paragraph formatting and use Grammarly.com. Provide a summary/conclusion of the analysis of all three articles.

Discuss how the information can improve:

- Patient outcomes
- Nursing practice
- Evidence-based practice/Quality Improvement efforts
- Healthcare as a whole

### References

Sotiriadis, A., Petousis, S., Thilaganathan, B., Figueras, F., Martins, W. P., Odibo, A. O., Dinas, K., & Hyett, J. (2018). Maternal and perinatal outcomes after elective induction of Labor at 39 weeks in uncomplicated singleton pregnancy: A meta analysis. *Ultrasound in Obstetrics & Gynecology*, 53(1), 26–35. <https://doi.org/10.1002/uog.20140>