ABSTRACT

In this single blinded randomised clinical trial, 104 expectant clients were randomised to either receive Misoprostol or Dinoprostone per vaginum for induction of labour. The outcome indicators were amount of drug used, failure of induction, and duration from 1st insertion of the drug to delivery, amount of blood loss during labour, complications of labour and foetal outcome of labour.

The amount of drug used was less in the Misoprostol compared with Dinoprostone group (e.g. for 2 insertion, it was 38.5% Vs 25% respectively T value 1.172 Range ±0.235)

Failure rate of induction was 11.5% Vs 1.9% for the respective arms (Dinoprostone Vs Misoprostol). The chi-squared value being 0.41 expected value 0.05. this was significant.

The duration of labour was also shorter for Misoprostol than Dinoprostone with 78.8% Vs 40.4% delivering within the 1st twelve hours. The duration between 12-24 hours were 21.2% Vs 58.8% which was significant giving a test statistic of 1.037 which fell outside the critical value of ±0.597, level of significance being 0.05.

There was also less blood loss and fetal complications. The mode of delivery and fetal outcome were comparable in both arms.