
Summary

This study was designed to observe the effects of increased intravenous fluid infusion on uterine activity during normal labor. It was conducted on 150 nulliparous women in active labor without any maternal or fetal complication admitted to the Obstetrics and Gynecology Department of Benha University and Al Mahalla Hospital. They were divided into three groups according to rate of infusion of intravenous fluid which was given to them, each group including 50 women. Group A: received 250ml /h, group B: received 125ml /h, group C (control group): received no intravenous fluid. All women were subjected to the following investigations:

- a. Complete blood picture.
- b. Urine analysis for albumin, sugar and ketones.
- c. Rhesus factor.
- d. Random blood sugar.

All studied women were subjected to full history taking, general examination, pelvic examination and their progress of labor were observed on the partogram. If there was failure of satisfactory progress (measured as a cervical dilatation rate of less than 1 cm / hour), these women were managed by amniotomy, augmentation of labor with oxytocin which was diluted in Ringer's solution and the progress of labor was followed up carefully. If there was fetal distress or failure to manage arrest of fetal head descends, the delivery was done by cesarean section.

Our study showed that the progress of labor was significantly faster in the 250-ml group than in the 125-ml group and the control group. Duration of active phase was significantly shorter in 250-ml group than in

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the 125-mL group and the control group. There was no significant difference between the duration of the second stage in the three groups. There was no significant difference in frequency of oxytocin administration for inadequate labor progress between the three groups. There was no significant difference in frequency of the cesarean section between the three groups. Assessment of neonatal wellbeing shows no significant difference between three groups.

Accordingly, we can suggest that the increased intravenous fluid during labor improves the progress of labor and reduces duration of labor.