in the Wales Deanery (UK). Grounded theory was used to analyse the responses, including free text.

While 8% of respondents cited lack of knowledge of or disagreement with the practise, 57% of obstetricians and trainees admitted that as the surgical sequence involved in a delivery is automatic, they sometimes or often forgot to incorporate a delay before clamping. This automaticity is adaptive, arising from a need to reduce cognitive load during complex motor tasks.

Where visuospatial skills are sufficiently refined (task mastery), cognitive attentional skills are engaged only at key points. These are used as landmarks in expert sequences such as playing a musical instrument, using a gaming controller or surgery. During an abdominal delivery, clamping of the cord is unlikely to be a key landmark. This applies particularly for the experienced obstetrician in contrast to the novice.

The hypothesis that there would be an inverse relationship between the experience of the surgeon and the ease of incorporation of a new element to the operation was supported. Simple aide memories facilitated incorporation of the new process, shown at reaudit.

Methods

The notes of 395 women who had labour induced within a large tertiary unit in the North West between August 2009 and May 2012 were studied, excluding those induced for prelabour ruptured membranes. Data was collected retrospectively using a standard proforma.

Results

95 women received prostaglandin gel and 302 received the pessary (28 also needed gel). The median ADT for women induced using gel was significantly shorter at 26.57 hours (interquartile range 15.87–42.96) than with the pessary at 31.83 hours (20.73–46.54 hours p = 0.002 non-parametric testing). There was no difference in parity or oxytocin use between the 2 groups. Outcomes between the 2 groups were the same, with no difference in postpartum haemorrhage rate or vaginal delivery (p > 0.05).

Conclusions

The prostaglandin pessary was associated with a longer ADT, which is perhaps unsurprising given its longer duration of use prior to assessment for amniotomy. This is probably because the predicted increase in labour commencing in the pessary group without further oxytocin did not occur, reflected in no difference in oxytocin use between the 2 groups. This has implications for bed occupancy, patient flows and NHS costs.

Background

Vaginal twin deliveries can be complicated and senior obstetrician presence may be advisable. Our unit has consultant on-site presence between 08:30 and 20:30, so we sought to determine when inductions should be commenced to maximise deliveries during these “daytime” hours.

Methods

Women having prostaglandin induction after 36 weeks, resulting in at least one vaginal delivery and where no delays to normal care occurred were selected. Nulliparous and parous women were considered separately and the percentage of “daytime” deliveries calculated for inductions commenced in the morning (06:00 – 11:59), afternoon (12:00 – 17:59) and evening (18:00 – 23:59). Inductions commenced 00:00 – 05:59 were excluded due to infrequency. Analysis of length of labour (defined from start time to delivery of first twin) was performed.

Results

The majority of inductions were commenced in the morning. For nulliparous women, 71% of morning-commenced inductions resulted in “daytime” deliveries, compared with 50% and 67% of afternoon-commenced and evening-commenced procedures. Labour length was normally distributed with mean of 21.8 hours (SD 7.9 hours). For parous women, afternoon-commenced induction produced a higher percentage of “daytime” deliveries; 85% compared with 50% and 67% for morning-commenced and evening-commenced inductions. Labour length was normally distributed with mean of 15.0 hours (SD 7.0 hours).

Conclusions

For nulliparous women, commencing induction in the morning provides a high likelihood of “daytime” delivery. For parous women, analysis of inductions by start time and mean length of labour suggests a trial of commencing induction later in the day might increase the proportion of “daytime” deliveries.