

Review article

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Advantages and disadvantages of low amniotomy

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If MUNROE [14] is correct the importance of ruptured membranes for induction of labor is being discussed since 100 b.c. when SORANUS [21] first indicated such a technique to enhance labor.

At the beginning of the second half of this century low amniotomy was commonly accepted as a safe method to induce and enhance labor (KREIS [12], HUSSLEIN [10, 11], BAUMGARTEN [4, 5]).

In 1972 CALDEYRO-BARCIA and his group [8, 16, 17] published their results of a study on biochemical, anatomical, and cardiotocographic findings in fetuses born after early or late rupturing membranes respectively.

In this paper it is stated that

1. numbers of type I dips occurred more frequently in the group with early ruptured membranes,
2. cephalic bone disalignment is more frequently being found in this group, and
3. compression of umbilical cord can more often be found and easier achieved under these conditions.

They state verbally: "With membranes intact the fetus is less influenced by uterine contractions".

Though CALDEYRO-BARCIA never drew further conclusions from this very important quotation the question naturally arises whether it is either dangerous or can be even contra-indicated to rupture membranes to induce or enhance labor. SCHWARCZ [18] of the C.L.A.P.-group under supervision of CALDEYRO-BARCIA started a multi-center study on this problem in South America, the result of 692 cases has been already evaluated and published and nearly 2.000 cases are now

Curriculum vitae

Dr. BAUMGARTEN, born 24. 6. 1926 in Vienna, got his M.D. Diploma in 1953, became assistant professor for Obstetrics and Gynecology in 1967, full-time professor in 1972 and head of the Department of Perinatology at the University of Vienna (II. Dept. for Obstetrics and Gynecology; Chairman Professor Dr. H. HUSSLEIN) in 1974. He founded the



first intensive-care delivery room in 1966 and is working in the field of Perinatology since 1964.

under examination while this report is being prepared.

By courtesy of Prof. Roberto CALDEYRO-BARCIA we used the same protocol of the C.L.A.P.-study in our own department (Department of Perinatology, University of Vienna, Medical School). In addition to this protocol we added one including cardiotocographic studies throughout labor and gas analysis from the umbilical cord blood post partum. The results of both working groups are compared and it will be tried to answer the question whether induction of labor by low amniotomy or enhancement of labor by the same manoeuvre is dangerous to the fetus or not.

Before material and methods are explained in detail it seems necessary to discuss the advantages