STUDY ON COMPARISON OF CERVICAL LENGTH MEASURED TRANSVAGINALLY AND BISHOP SCORE IN PREDICTING SUCCESSFUL LABOUR INDUCTION

ABSTRACT

Objectives:

To compare the predictive value of the Bishop Score and Transvaginal ultrasonographic cervical length in successful labour induction to estimate the most useful cutoff points for the two methods.

Study design:

It is a prospective observational study. In this study 100 primigravida with gestational age of 37-42 weeks of gestation admitted for induction of labour, the cervical length was measured by transvaginal ultrasound and then Bishop Score was assessed by digital examination. Predictive values for successful labour induction was detected and compared.

Results:

Using Spearman’s rho correlation both TVS cervical length and Bishop score have significant correlation in predicting the success of induction of labour. Cervical length is the better predictor of the likelihood of delivering vaginally within 24hrs. In the receiver operating characteristic curves, the best cutoff points for the prediction of successful induction was 26mm for cervical length and 4 for the Bishop Score. However, cervical length appears to be a better predictor than the Bishop Score, with a sensitivity of 58.1% and a specificity of 100% compared to 70.3% and 45.5% respectively.

Conclusion:

Transvaginal sonographic measurement of cervical length is a better predictor of the likelihood of vaginal delivery within 24hrs of induction when compared to Bishop Score.

Keywords: Transvaginal Sonography, Bishop Score, Induction of Labour.