Research Article

INTERNATIONAL JOURNAL OF CURRENT ADVANCED RESEARCH
ISSN: O: 2319-6475, ISSN: P: 2319-6505
Available Online at www.journalijcar.org
Volume 15; Issue 05; May 2026; Page No.696
DOI: http://dx.doi.org/10.24327/ijcar.2026.0696.0116

Subject Area : Bihar

COMPARATIVE STUDY OF ORAL VERSUS VAGINAL MISOPROSTOL FOR INDUCTION OF LABOUR AT TERM: A RANDOMIZED CONTROLLED TRIAL

Dr. Aishwarya

Department of Obstetrics and Gynaecology, Gopal Narayan Singh University, Jamuhar, Rohtas

ARTICLE INFO

Received 13th April, 2025
Received in revised form 25th April, 2025
Accepted 16th May, 2026
Published online 28th May, 2026

Key words:

Irvingia gabonensis almonds, metabolic diseases, healthy diet, food supplement

ABSTRACT

Objectives: To compare the efficacy and safety of oral versus vaginal misoprostol for induction of labour at term**. Methods:** A prospective randomized controlled study was conducted on 100 term pregnant women with Bishop score ≤6. Patients were divided into oral and vaginal groups. **Results:** Vaginal misoprostol showed significantly lower failed induction rates and fewer doses required. Oral misoprostol showed lower NICU admissions. No significant difference in mode of delivery. **Conclusion:** Vaginal misoprostol is more effective, while oral misoprostol is safer for neonatal outcomes.

INTRODUCTION

Induction of labour is a common obstetric procedure. Misoprostol is widely used due to its effectiveness and affordability. This study compares oral and vaginal routes.

MATERIALS AND METHODS

Prospective randomized controlled trial including 100 patients divided equally into oral and vaginal groups.

RESULTS

Parameter	Oral	Vaginal	p-value
Failed induction (%)	14	4	<0.05
NICU admission (%)	10	14	<0.05
Mean doses	3.5	2.1	<0.05
LSCS rate (%)	22	20	>0.05

DISCUSSION

Vaginal misoprostol showed superior efficacy likely due to better bioavailability. However, slightly higher NICU admissions suggest cautious use.

*Corresponding author: **Dr. Aishwarya**

Department of Obstetrics and Gynaecology, Gopal Narayan Singh University, Jamuhar, Rohtas

CONCLUSION

Both routes are effective. Vaginal route is more efficacious; oral route offers better neonatal safety.

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