ABSTRACT

**Objective**: To evaluate the incidence of failed induction of labour (FIOL), and determined whether this resulted from non-adherence to the induction of labour protocol.

**Design and Methods**: This study was a retrospective cohort analysis of all term patients who underwent induction of labour from 1st January to 30th June 2018.


**Results**: They were 388 patients induced that met the eligibility criteria outlined, 298 were included in the study while 90 were excluded because of failure to locate the patient records. 77.5% of the term patients induced achieved spontaneous vaginal delivery and 21.8% delivered by cesarean section, the nulliparous patients had a higher incidence of cesarean delivery at 33.1% (P=0.0514), compared with the multiparous patients 10.6% (P=0.0158). The rate of FIOL was 10.4% (31 patients). 48.4% of these diagnosis were not in accordance with the labour induction protocol (P<0.0001).

**Conclusions**: The incidence of FIOL was 10.4%, of which 48.4% was not in accordance to the protocol. Standardization of management and adherence to the labour induction protocol decreases the time to delivery and cesarean section rate.

**Recommendations**: The diagnosis of FIOL should be made in accordance with the international guidelines adapted by GPHC’s induction protocol.
Keywords: Failed Induction of Labour (FIOL); non-adherence; labour protocol.

COMPETING INTERESTS

Authors have declared that no competing interests exist.