

# IMPLEMENTATION OF LABOUR CARE GUIDE: IMPROVING MATERNAL AND FETAL OUTCOMES

## INTRODUCTION

The **partograph**, introduced by WHO during the Safe Motherhood Initiative, has been key in monitoring labour to prevent obstetrics complications. The **modified WHO partograph** (2000) excluded the latent phase for simplicity, while the **WHO Labour Care Guide (LCG)** (2020) integrates updated evidence on labour duration, intervention triggers, and respectful maternity care. The LCG aims to:

- Optimize maternal and fetal outcomes.
- Provide standardized monitoring of labour progress.
- Highlight deviations and guide timely interventions.

## OBJECTIVES

To evaluate the effectiveness of the Labour Care Guide (LCG) in improving maternal and fetal outcomes by comparing:

- Caesarean section rates.
- Maternal complications.
- Neonatal outcomes.

REFERENCES

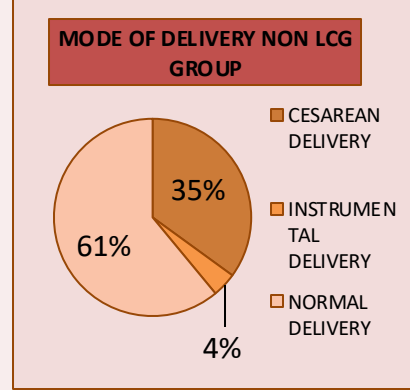
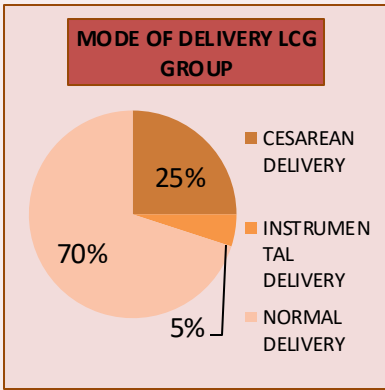
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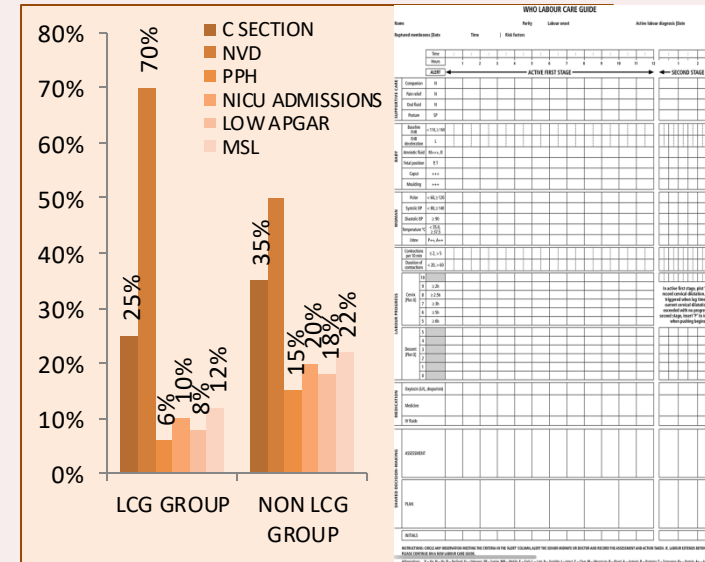
## METHODOLOGY

**Study Design:** Retrospective comparative study.  
**Sample Size:** 200 women (100 in the LCG group and 100 in the non-LCG group).  
**Data Collected:**  
**Demographic characteristics:** Age, parity, gestational age.  
**Labour and delivery characteristics:** Mode of delivery, labour duration, pain management.  
**Maternal outcomes:** Postpartum hemorrhage (PPH), complications.  
**Fetal outcomes:** NICU admissions, Apgar scores.  
**Statistical Analysis:**  
Continuous variables were compared using **Student's t-test**, expressed as means with standard deviations (SD).  
Categorical variables were analyzed using **Chi-square test** or **Fisher's exact test** as appropriate.  
Statistical significance was set at **p < 0.05**.



## RESULTS

Parameter	LCG Group (n=100)	Non-LCG Group (n=100)	p-value
Caesarean Section Rate	25%	35%	0.004
Normal Vaginal Delivery	70%	61%	0.006
PPH incidence	6%	15%	0.03
NICU admissions	10%	20%	0.04
Low APGAR score	8%	18%	0.02
MSL	12%	22%	0.03



## DISCUSSION

- Our findings demonstrate the significant advantages of the Labour Care Guide (LCG) over traditional protocols, aligning with previous studies.
- In contrast, our study found significantly reduced Caesarean section rates (25% vs. 35%, **p = 0.004**) and PPH (6% vs. 15%, **p = 0.03**).
- Another study highlighted the LCG's role in improving person-centered care and timely interventions, consistent with our results of fewer NICU admissions (10% vs. 20%, **p = 0.04**).

## CONCLUSION

The **Labour Care Guide (LCG)** significantly enhances labour management by improving maternal and fetal outcomes and results strongly support the adoption of LCG as a standardized labour care protocol in clinical settings.