Evidence-Based Intrapartum Care in Vaginal Births: Direct Observations in a Tertiary Care Hospital in Sri Lanka

BRGTK Weerasingha¹#, RM Abeyrathne², S Tennakoon³ and RMCJ Ratnayake¹

¹Department of Obstetrics and Gynaecology, Faculty of Medicine, University of Peradeniya, Sri Lanka
²Department of Sociology, Faculty of Arts, University of Peradeniya, Sri Lanka
³Department of Community Medicine, Faculty of Medicine, University of Peradeniya, Sri Lanka

#tkweerasingha890@gmail.com

Identifying the gaps between evidence-based care and actual intrapartum care has paramount importance in improving maternal and neonatal outcomes at birth. This study aimed to evaluate the current intrapartum practices of a tertiary care hospital in central Sri Lanka, during vaginal births. World Health Organization (WHO) recommendations on intrapartum care for a positive childbirth experience were used as the benchmark for this evaluation. An observational study was carried out at the delivery room of Teaching Hospital, Peradeniya among 196 labouring women who were selected using systematic random sampling. The interventions throughout labour and childbirth were observed and recorded. A non-participant observation checklist covering labour room admission procedures, management of stages of labour, immediate care of the new-born and mother after birth was used for data collection. Data were analysed using SPSS version 22. Providing privacy (33.2%), offering oral fluids (39.3%), opioids for pain relief (48.5%), and measuring maternal vital signs shortly after birth (60.2%) were found to be infrequent. Recommended practices such as encouraging correct pushing techniques, prophylactic uterotonics, skin-to-skin contact, early initiation of breast feeding, and regular assessment of vaginal bleeding were found to be frequent. However, companionship during labour, upright positions during labour, women’s choice of birth position and the use of relaxation or manual techniques for pain relief were not observed in hospital intrapartum care. The findings indicate that additional attention and monitoring are required to align current intrapartum care practices with the WHO guidelines. Moreover, adherence to evidence-based intrapartum care should be encouraged among healthcare providers.

**Keywords:** evidence-based care, intrapartum care, vaginal birth