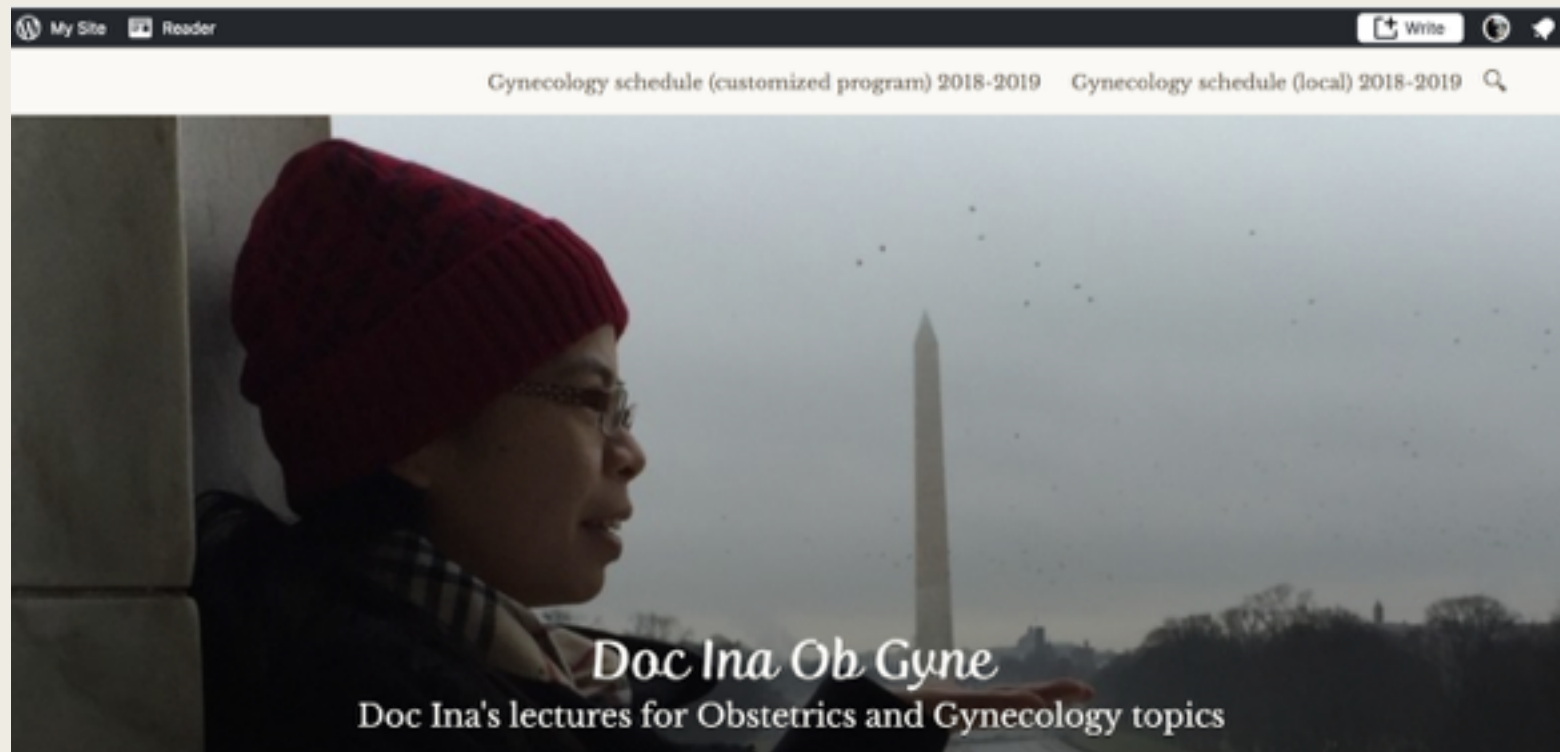




# PLOTTING AND INTERPRETING DYSTOCIA CURVES

Ina S. Irabon, MD, FPOGS, FPSRM, FPSGE  
Obstetrics and Gynecology  
Reproductive Endocrinology and Infertility  
Laparoscopy and Hysteroscopy

# To download lecture deck:



# Abnormal labor patterns

LATENT  
PHASE

ACTIVE  
PHASE

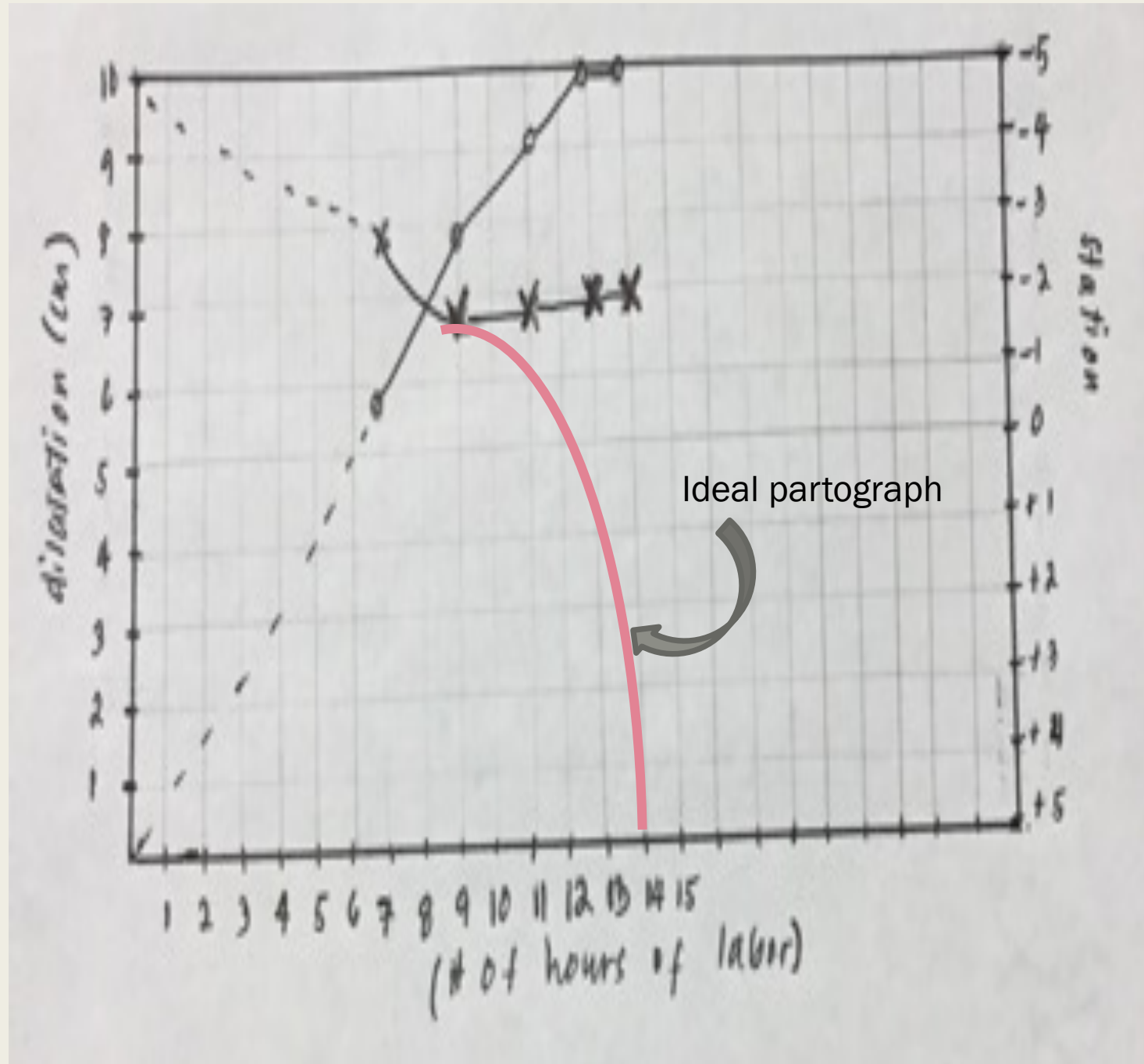
**TABLE 23-2.** Abnormal Labor Patterns, Diagnostic Criteria, and Methods of Treatment

Labor Pattern	Diagnostic Criteria		Preferred Treatment	Exceptional Treatment
	Nulliparas	Multiparas		
<b>Prolongation Disorder</b> Prolonged latent phase	> 20 hr	> 14 hr	Bed rest	Oxytocin or cesarean delivery for urgent problems
<b>Protraction Disorders</b> Protracted active-phase dilatation Protracted descent	< 1.2 cm/hr < 1 cm/hr	1.5 cm/hr < 2 cm/hr	} Expectant and support	Cesarean delivery for CPD
<b>Arrest Disorders</b> Prolonged deceleration phase Secondary arrest of dilatation Arrest of descent Failure of descent	> 3 hr > 2 hr > 1 hr No descent in deceleration phase or second stage	> 1 hr > 2 hr > 1 hr		
			Evaluate for CPD: CPD: cesarean No CPD: oxytocin	Rest if exhausted Cesarean delivery

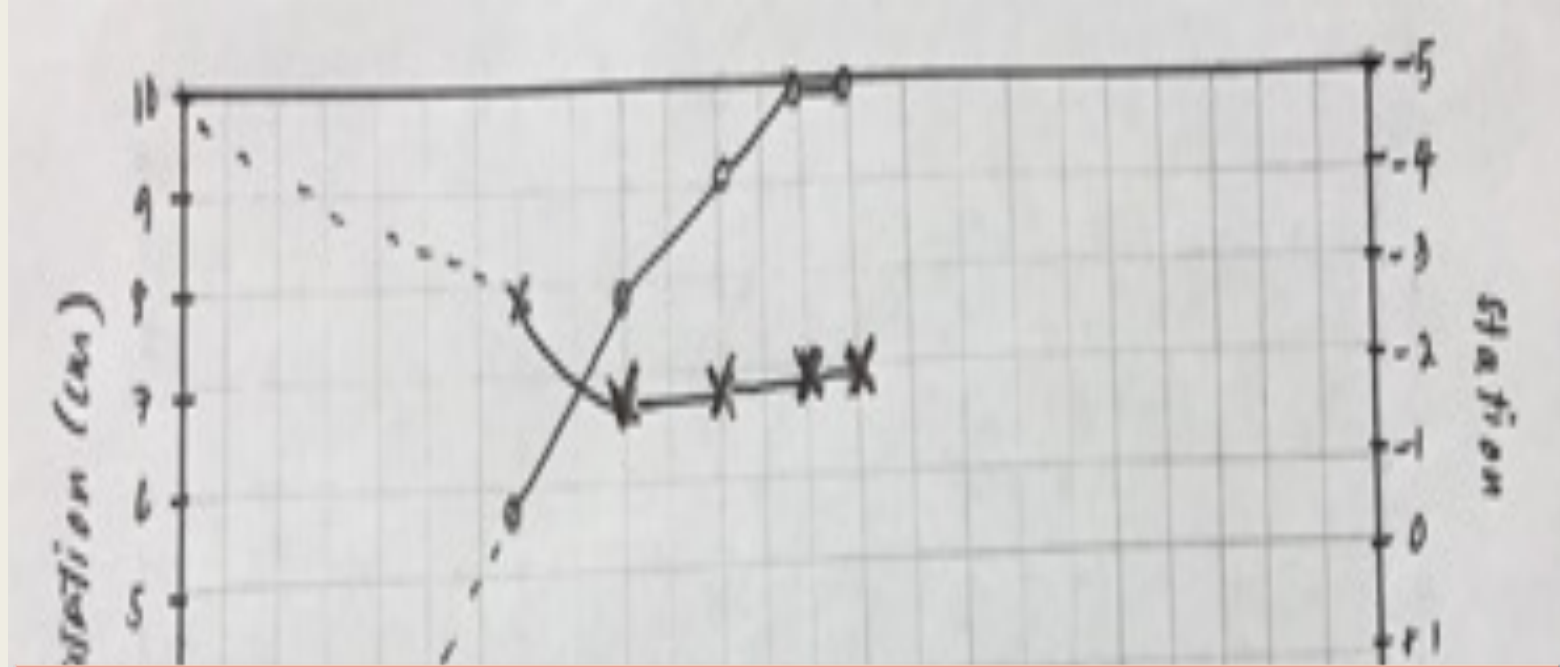
CPD = cephalopelvic disproportion.  
Modified from Cohen, 1983.

# Practice:

- Patient came in at the 7<sup>th</sup> hour of labor, with 6cms cervical dilatation, station -3
- 2 hours later, cervix dilated to 8cms, and fetal head descended to station -2
- At the 11<sup>th</sup> hour of labor, cervix dilated to 9cms, still at station -2
- At the 13<sup>th</sup> hour of labor, cervix is fully dilated, with fetal head still at station -2
- One hour after, fetal station was still at station -2



# Practice:



**TABLE 23-2.** Abnormal Labor Patterns, Diagnostic Criteria, and Methods of Treatment

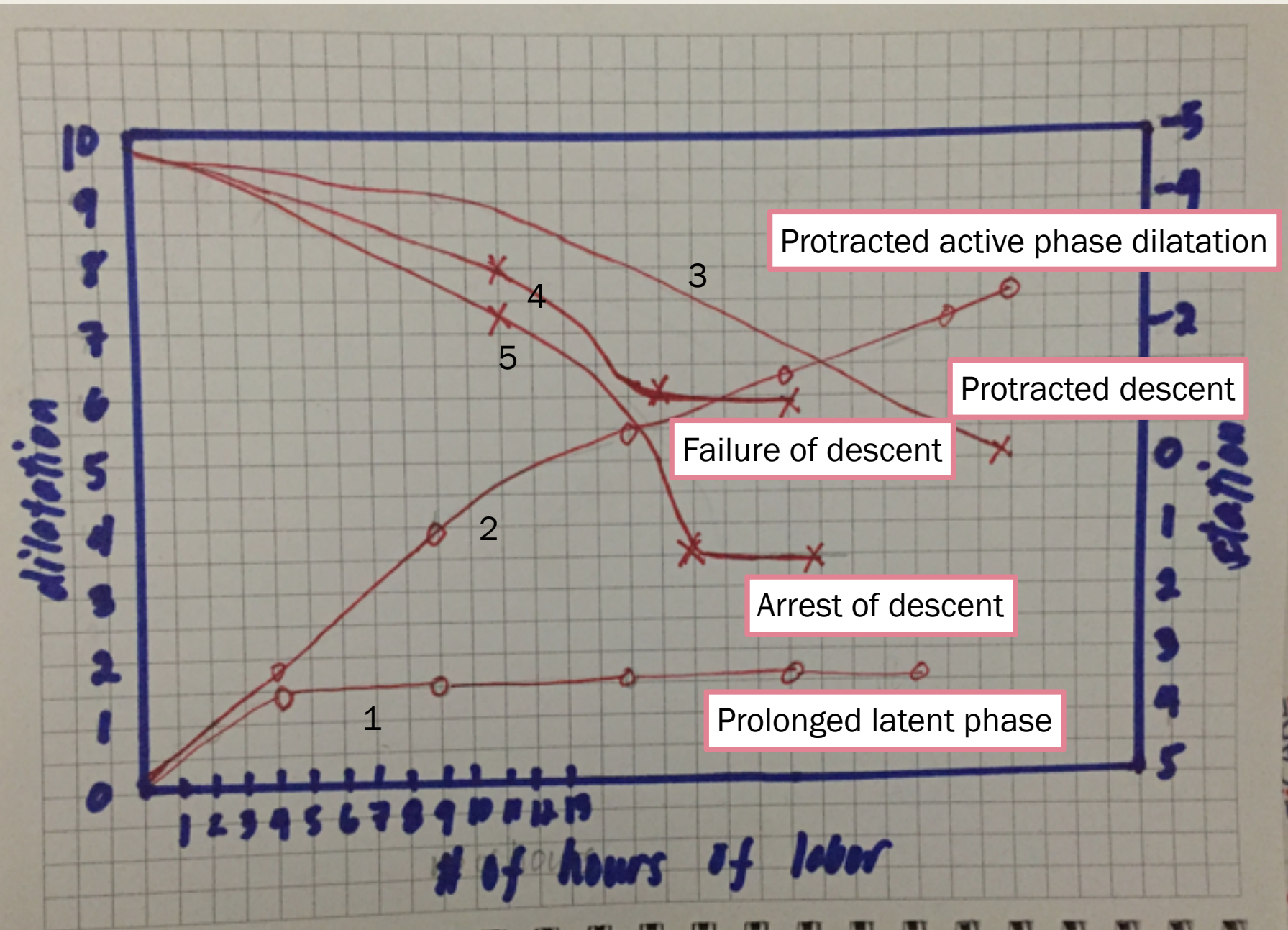
Labor Problem	Diagnostic Criteria		Preferred Treatment	Exceptional Treatment
	Nulliparas	Multiparas		
<b>Prolongation Disorders</b> Prolonged latent phase	> 20 hr	> 14 hr	Bed rest	Oxytocin or cesarean delivery for urgent problems
<b>Prolongation Disorders</b> Prolonged active phase dilatation Prolonged second stage	< 1.2 cm/hr < 1 cm/hr	1.5 cm/hr < 2 cm/hr	Expectant and support	Cesarean delivery for CPD
<b>Arrest Disorders</b> Prolonged deceleration phase Secondary arrest of dilatation Arrest of descent Failure of descent	> 3 hr > 2 hr > 1 hr	> 1 hr > 2 hr > 1 hr	Evaluate for CPD: CPD: cesarean No CPD: oxytocin	Rest if exhausted Cesarean delivery

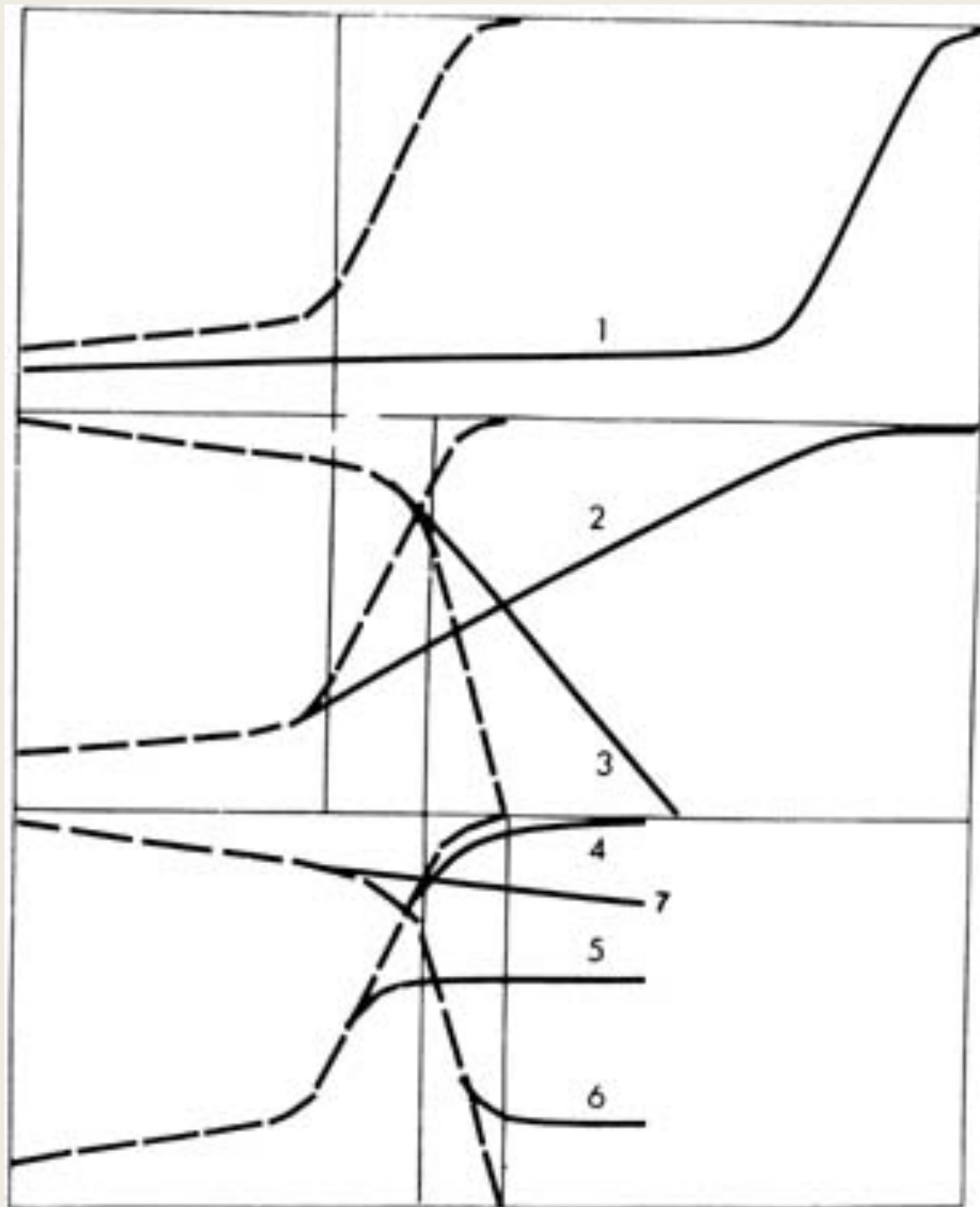
CPD = cephalopelvic disproportion.  
Modified from Cohen, 1983.

slow

stop







1. Prolonged latent phase
2. Protracted active phase dilatation
3. Protracted descent
4. Prolonged deceleration phase
5. Secondary arrest of dilatation
6. Arrest of descent
7. Failure of descent

<https://www.glowm.com/resources/glowm/cd/pages/v2/ch073/framesets/002f.html>

# Rx PRESCRIPTION

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

DATE \_\_\_\_\_

AGE \_\_\_\_\_

*Thank you!*

*youtube channel: Ina Irabon*

*www.wordpress.com: Doc Ina OB Gyne*