



## **Forceps and ventouse effective in assisted vaginal delivery**

### **Clinical question**

How effective are different instruments in terms of achieving a vaginal birth and avoiding significant morbidity for mother and baby?

### **Bottom line**

For situations in which there is no clear clinical indication for a specific instrument, vacuum extraction should be the first-line method for assisted birth. Forceps are the better instrument in terms of achieving a successful delivery. However, they are also associated with higher rates of complications for the mother (perineal trauma, tears, requirements for pain relief and general anaesthesia, and incontinence). There are risks of injury to the baby with both types of instrument. Comparisons between different types of ventouse revealed that the metal cup was better at achieving successful delivery than the soft cup, but with more risk of injury to the baby (scalp injuries and cephalhaematoma). There are no significant differences between the handheld and the standard vacuum.

### **Caveat**

Not all studies considered all outcomes and, in particular, there were differences in the types of complications encountered by mothers and babies. In addition, there were no studies identified for some comparisons.

### **Context**

Instrumental or assisted vaginal birth is commonly used to expedite birth for the benefit of either mother or baby, or both. It is sometimes associated with significant complications for both mother and baby. The choice of instrument may be influenced by clinical circumstances, operator choice and the availability of specific instruments.

### **Cochrane Systematic Review**

O'Mahony F, Hofmeyr GJ and Menon V. Choice of instruments for assisted vaginal delivery. Cochrane Reviews, 2010, Issue 11. Article No. CD005455. DOI: 10.1002/14651858.CD005455.pub2. *This review contains 32 studies involving 6957 participants.*

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