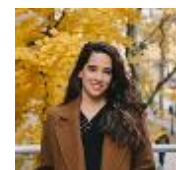


## High vs. low dose oxytocin for induction or augmentation of labour

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### Abstract

**Statement of the problem:** While it is widely known that oxytocin can be used as an inducing and augmenting agent for labour, there is limited information on whether high-dose oxytocin results in a clinically significant change in labour. This study examines whether high dose oxytocin for induction or augmentation of labour safely shorten time to delivery.

**Methodology:** A systematic review of the literature was conducted using Medline, Embase, Cochrane, and Central databases. A total of 374 were included in this review. Articles were further selected based on regency of publication as well as depth of detail regarding the PG treatment regimens Inclusion criteria were women at term requiring either augmentation or induction of labour. Intervention was intravenous high dose oxytocin administration. The primary outcome was cesarian section, whereas secondary outcomes included spontaneous vaginal delivery, time to delivery, uterine hypertonus, and 5min Apgar score.

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### Biography:

Sheida Naderi-Azad has completed her Bachelor of Science in Microbial and Environmental Pathophysiology from University of British Columbia and is currently an MD Candidate at the University Of Toronto Faculty Of Medicine. She has an expertise in immunology and oncology, with a deep interest in changing metabolic demands with aging. She has most recently completed a summer studentship at the Dana Farber / Harvard Cancer Centre. She has had numerous published articles and presentations on cancer therapeutics, inflammatory conditions and women's health.