Evidence Update

Maternal Health Series

Do enemas given to women during the first stage of labour benefit women and their babies?

Enemas during the first stage of labour do not reduce infections or episiotomy re-opening in mothers or infections in newborn babies.

Inclusion criteria

Studies:

Randomized controlled trials.

Participants:

Women during the first stage of labour, and their babies.

Intervention:

Intervention: enemas. Control: no enemas.

Outcomes:

Infections in the mother, including episiotomy reopening, infections in the baby, and other birth-related outcomes.

Results

- Three trials involving 1765 women were included; one trial had adequate allocation concealment.
- In puerperal women, there was no significant difference in infection rates between those receiving an enema and those who did not (594 women, 2 trials), and no difference in episiotomy re-opening (372 women, 1 trial).
- In babies, there were no significant differences in umbilical infection between enema and non-enema groups (592 women, 2 trials), or any infection in the first month of life (370 babies, 1 trial).
- There were no significant differences in reported satisfaction with care between women receiving an enema and those not receiving enema (1027 women, 1 trial).

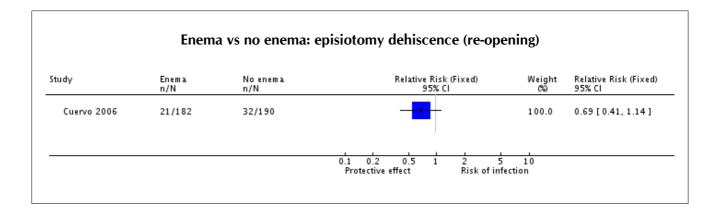






Adapted from Reveiz L, Gaitán HG, Cuervo LG. Enemas during labour. *Cochrane Database of Systematic Reviews* 2007, Issue 4. Art. No.: CD000330. DOI: 10.1002/14651858.CD000330.pub2. *Evidence Update* published in August 2008.

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Study	Enema n/N	No enema n/N	Relative Risk (Fixed) 95% Cl	Weight ୯କ	Relative Risk (Fixed) 95% Cl
Cuervo 2006	3/179	0/191		33.0	7.47 [0.39, 143.55]
Drayton 1984	1/109	1/113		67.0	1.04 [0.07, 16.37]
Total (95% Cl) Total events: 4 (Enem Test for beterogeneity		304 df=1 p=0.33 l² =0.0%		100.0	3.16 [0.50, 19.82]

Authors' conclusions

Implications for practice:

Enemas during labour are unlikely to benefit women or their newborn babies.

Implications for research:

No further trials are needed.