Maternal oxygen inhalation therapy for intrauterine fetal resuscitation

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Abstract

Maternal oxygen (O2) inhalation therapy is widely used for intrauterine fetal resuscitation. However, the research results were inconsistent in the effects of maternal O2 administration on fetal oxygenation. There were only four randomized controlled trials (RCTs) of O2 inhalation during labor showed that O2 inhalation therapy did not improve the fetal acid-base metabolism state or even increased the risk of fetal acidosis. Several studies showed that O2 inhalation therapy triggered maternal-fetal oxidative stress, and several studies found hyperoxia-induced vasoconstriction. This article reviewed the controversy of maternal O2 administration on mother and fetus during labor.

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