No link between labor induction/augmentation and autism

By ACSH Staff — February 23, 2015

The prevalence of autism spectrum disorders (ASD) characterized by persistent deficits in social communication and social interaction as well as restricted repetitive patterns of behavior seems to have increased significantly over the last thirty years. This has led scientists, and others who may not be so qualified, to speculate about the causes, blaming everything from vaccines to pollution none of which has been supported by scientific research. Now, a new study finds no link between labor induction or augmentation and autism.

A woman is administered Pitocin, which contains the hormone oxytocin, to induce labor when it has not yet begun or to augment labor when the obstetrician determines that the strength, duration or frequency of contractions should be artificially increased. Since children with ASD sometimes also have abnormalities in the oxytocin system which plays a role in social and repetitive behaviors, some theorized that there might be a connection between induced or augmented labor and the subsequent development of ASD.

Researchers led by Dr. Erin Clark of the University of Utah analyzed data from the Utah Registry of Autism and Developmental Disabilities for five birth cohorts between the years 1998 and 2006, as well as from the Utah Department of health Vital Records and Statistics. Of the more than 166,000 children included in this analysis, about 2,500 had a diagnosis of ASD. Researchers adjusted for confounders related to socioeconomic status, maternal health and pregnancy-related events and conditions, and found no significant differences between those with and without ASD related to having been exposed to labor induction and/or augmentation. No differences were seen among boys and girls with ASD.
Although the majority of the studies previously conducted that examined the association between autism and labor induction/augmentation found no association, one study conducted [6] in 2013 found such an association in boys. However, no causal relationship could be proven from this observational study, and researchers involved in this study came to the same conclusion as Dr. Clark:

This work supports current recommendations [from the Society for Maternal-Fetal Medicine and the American College of Obstetricians and Gynecologists] that recommend against a change in current guidance regarding counseling and indications for, and methods of labor induction and augmentation.

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