Objective
To detect whether cervical elastography can predict a successful outcome of labor induction.

Methods
Cervical elastography of the internal and the external os was performed in 141 women, during 37-42 weeks of gestational age. Elastography results were categorized to positive and negative ones. The variants were analyzed with chi-test and t-test. Significant results were evaluated with multiple logistic regression test.

Results
76 women were included in this study. Induction was done with prostaglandins, amniotomy or cervical balloon. The main reason for induction was postdate pregnancy (35%). A statistically significant correlation was found between positive elastogram of the internal os (70%) and successful induction. Only 14.3% of women with positive elastography had a failed induction. Sensitivity, specificity, PPV and NPV of successful induction with positive elastography of the internal os was: 93%, 53%, 70% and 86% respectively.

Conclusion
Positive cervical elastography of the internal os can be used as good predictor of induction success.