

Induction of Labour in First Time Mothers - What it Means

Labour is a natural process that usually starts on its own. Sometimes labour needs to be started artificially; this is called induction of labour. Most pregnant women go into labour naturally within a week or two of their agreed 'due' date. However, a small number of pregnancies are prolonged beyond this stage and induction of labour is offered at 10-14 days after the due date.

Why may I be offered induction?

The most common reasons for induction are:

- To avoid a pregnancy lasting longer than 42 weeks (known as a prolonged pregnancy)
- If your waters break but labour does not start within 24 hours
- However there are many other indications when your doctor thinks starting labour early is safer for you or your baby. These will be discussed with you if needed

If you are offered induction

Your midwife or obstetrician should explain why you are being offered induction. They should also talk about the risks and benefits involved, explain the alternatives, and encourage you to look at sources of information. You also should be told about what the options would be if inducing your labour doesn't work.

Before Induction of Labour

Before you are offered induction, you may be offered a membrane sweep to help you go into labour before 42 weeks. This involves your obstetrician or midwife placing a finger into the cervix and making a circular, sweeping movement to separate the membranes that surround the baby, or massaging the cervix if this is not possible. It may cause some discomfort, pain or bleeding, but makes it more likely that you will go into labour naturally. In routine care you should be offered a membrane sweep around 40 and 41 weeks.

What does induction involve?

You will be given a date for induction and a midwife from the antenatal ward will call you at home before 12pm to arrange the most suitable time to come in. Please ensure the NNUH has the correct phone number and call the hospital if you haven't heard anything by this time.

On admission you will be assessed by a midwife, including a handheld ultrasound to confirm your baby is head down. The baby's heartbeat will be recorded, and any contractions monitored for a period of 30 - 45 minutes before an internal examination is performed by the midwife to assess your cervix. The midwife will assess your cervix to decide what method of induction is appropriate. If your cervix has begun to open, you will be transferred over to the delivery suite to have your waters broken when it is safe to do so. If it has not, you will require a hormone pessary. The hormone pessaries contain an artificial form of the hormone produced naturally in the days leading up to spontaneous labour. This will help to soften the cervix and initiate labour. Further monitoring of your baby's heart will be performed when contractions begin. The pessary has a string attached, similar to a tampon, so that it can be easily removed if needed.

You will then be encouraged to go home if deemed safe to do so for 24 hours while the pessary works. If you do go home you should contact the delivery suite if your waters go, you have any bleeding, you have any concerns about your babies movements, you have regular contractions, or if you feel unwell in any way. A midwife will contact you at home after 12 hours to see how you are doing. If you choose not to go home, or it is not deemed safe, you are free to walk around the hospital with your birth partner. A midwife will be available on the ward at all times to answer any queries you may have.

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Induced labours are often more painful than spontaneous labours. You should be offered support and whatever pain relief is appropriate to you – in the same way as if your labour had not been induced. You should be encouraged to use your own coping strategies for pain relief as well. Labouring in water provides good pain relief.

What happens next?

If you have not gone into labour approximately 24 hours after administration of the pessary, it will be removed. You will be re-examined vaginally and if it not possible to break your waters, you may be given a further pessary. This pessary lasts 6 hours as opposed to 24 hours, and after this time it can be repeated.

If your cervix has begun to open you will be transferred to delivery suite, where your waters will be broken and you are likely to have a hormone drip. This will be as soon as it is possible. However, at busy times transfer to delivery suite may be delayed.

The induction process may take a few days, especially if multiple hormone pessaries are needed. If it is taking longer than this, the implications and possible outcomes will be discussed with you.

It is difficult to predict how you will feel after the pessary has been given. Some women have periods of tightening almost immediately, these can become stronger and you may go into labour, but they may settle down and stop all together. Speak to your midwife if you feel you need some form of pain relief or if you are worried at any stage. There is an information leaflet about pain relief in labour that includes self- help coping strategies which you may find helpful.

If you have not gone into labour by the end of the day, you are encouraged to get some sleep and we suggest that birth partners go home as the facilities for them are limited and not comfortable. We will contact them if labour starts during the night. However we do allow partners to stay throughout the night if they wish.

There may be occasions when there are delays with your induction. The medical staff continually review the women being induced and prioritise care to ensure the safety of you and your baby. The reasons for the delays will be discussed with you by your team if this situation arises.

If induction doesn't work

If you don't go into labour after induction, your midwife or obstetrician will discuss this with you, and check on you and your baby thoroughly. Depending on your wishes and circumstances, they may offer you another dose of hormone pessaries. In some circumstances, you may be offered a caesarean section.

What if I don't want to be induced?

If you do not wish to be induced please inform your midwife who will refer you to an Obstetrician for discussion of further options.

On you will get a phone call giving you a time and place to come in to. If you have not heard by 12:00, please call 01603 286165

For further information visit www.nice.org.uk About Induction of Labour – Information for the public <https://www.nice.org.uk/guidance/cg70/resources/induction-of-labour-pdf-313461649861>

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