

**APPENDIX 2 – Leaflet – Induction of Labour****Maternity****Patient information****Induction of Labour Leaflet****What is induction of labour?**

This is the process to start labour artificially. There are many reasons for induction, including if there are concerns regarding you or your baby's health. The decision to induce your labour will be discussed with you by your midwife or doctor.

The most common reason for induction is if your pregnancy goes beyond 41- 42 weeks. Induction at this time reduces the risk of stillbirth. To try and avoid induction of labour you will be routinely offered a stretch and sweep of your cervix from 40 weeks as this has been shown to encourage labour to start naturally.

**What are the alternatives to induction of labour?**

The alternative is to wait for labour to start naturally. If you decide to decline being induced we will discuss the options available to you, which may include additional monitoring for you and your baby and agree a plan.

**What are the risks of induction of labour?**

Labour following induction may be more painful requiring you to want an epidural. Women who have epidurals sometimes need an assisted delivery (forceps or vacuum).

.Occasionally induction of labour is not successful, if this happens, the next step will be discussed with you depending on your reason for induction of labour in the first place.

**How will my labour be induced?**

1. Medical method using dinoprostone gel or pessary, (first baby)
2. Cervical ripening balloon catheter,(second and subsequent baby and/or previous caesarean section)

**Information on medical method using Dinoprostone gel**

Please call the Antenatal Ward on the day of your induction at 07.30am, you will then be given a time to come in. There is a possibility that if the maternity unit is very busy we will need to delay your induction. ... This is to ensure that you and your baby receive a safe service and we will keep you informed of any delays.

Once admitted you will be assessed by a midwife who will check that you and your baby are well. The process of induction of labour can take a long time as it is an artificial process. We have to insert a gel into your vagina, next to your cervix to help soften and open enough to break your waters.

At the appropriate time we will reassess you and transfer you to labour ward, for your waters to be broken. Sometimes there can be a delay in transferring you if labour ward is busy and this will be explained clearly to you.

If you meet specific criteria you will be able to return home with information to return later for a further assessment.

Timings will be explained to you.

Most women will require an oxytocin(hormone) drip to strengthen their contractions, The progress of your labour and your baby's heartbeat will be monitored regularly until your baby is born.

Occasionally, the dinoprostone gel or the oxytocin drip used for induction causes your womb to contract too much and can cause your baby distress; medication will then be given to stop the contractions.

## Cervical ripening balloon catheters

A cervical ripening balloon catheter is used to open the neck of the womb (cervix) so we can break your waters.

Occasionally we will need to put your legs in stirrups to do this, a speculum is inserted into the vagina and the catheter is passed through the cervix. The catheter is supported in your underwear. The balloon is left in place for approximately 24 hours.

If labour begins then the balloon will fall out. If labour doesn't begin the balloon is deflated after 24 hours and removed, your waters are broken and if required the oxytocin (hormone) drip will be started. If we can't break your waters at this point alternative options will be discussed with you.

What are the advantages of using balloon catheters?

The benefits of the balloon catheters are:

1. If you meet specific criteria, you can go home, relax while waiting for labour to start, **any concerns contact Labour Line 0300 369 0388 or Antenatal Ward 01202 442336**
2. It reduces the risk of your womb contracting too much which can distress you baby
3. If you had a previous caesarean section, the use of a catheter can reduce the risk the scar from opening up.

Pain relief will be discussed with you by your midwife or doctor before or during your labour.

Further information:

NHS Choices Pregnancy and Baby Guide

[www.nhs.uk/planners/pregnancyareplanner](http://www.nhs.uk/planners/pregnancyareplanner)

National Institute for Health and Clinical Excellence  
<https://www.poole.nhs.uk/a-z-services/m/maternity/induction-of-labour.aspx>  
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## Contact details

Maternity Labour line: 0300-369 0388  
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