
Coping in labour

This leaflet is designed to make you aware of the different coping mechanisms that are available to you during labour. It will explain what the different choices are and any advantages or disadvantages that there may be. Every woman's experience of labour and childbirth is unique and each woman will have individual preferences and coping strategies. It is hoped that this leaflet will provide you with information to help you make an informed decision about your choices in labour. You are able to ask your midwife for advice and support at any time during your labour.

Breathing & Relaxation Techniques

A slow, deep, steady breath can help to release tension, reduce pain and increase feelings of relaxation. When you feel a contraction build, breathe out to empty your lungs, then, continue to breathe slowly and rhythmically for the duration of the contraction. Try to keep your shoulders soft and relaxed. You can breathe through your nose or your mouth; choose whatever you find more comfortable. It is beneficial to take some time out during your pregnancy to practice breathing techniques and find a method that works well for you.

You may find massage helpful during labour, especially if you have lower back ache. Your birth partner could massage your neck, shoulders or back during contractions. This can help to reduce tension and decrease discomfort. Massage can also be a good way for your partner to feel connected to you during your labour. Practice massage during your pregnancy; you may find that you have a preference for lighter or firmer touch massage.

Hypnobirthing

Hypnobirthing is an approach to birth that uses breathing exercises, relaxation techniques and self-hypnosis. The aim is to help you and your partner approach your baby's birth with confidence and to give you the tools that can help you both to remain calm and in control, whatever path your birthing takes. At Harrogate, we run a midwife-led Hypnobirthing course. For more information please email hypnobirthing@hdfn.nhs.uk.

Transcutaneous Electrical Nerve Stimulation (TENS)

A TENS machine is a small, hand held device that sends electrical impulses through small, sticky pads on your lower back. It isn't fully understood how a TENS machine helps to reduce pain, but it is thought that it helps to block pain signals sent to the brain. It is also thought to help trigger the release of hormones called endorphins (your body's natural pain killers) and it can act as a good distraction during contractions. You are in control of the strength of the electrical impulses and you can increase the intensity of impulses during a contraction. It is thought that a TENS

machine is more beneficial in early labour, so it may be helpful to hire one so that you can use it at home.

TENS machine advantages and disadvantages:

Advantages	Disadvantages
Non– invasive	Cannot be used in the bath/pool
Has no side effects for mum or baby	May not be effective pain relief in established labour
You are in control of the machine	
You can remain mobile	
Can be used at home if hired	
Can be combined with hypnobirthing, gas & air or diamorphine	

Birthing Pool

When you are at home in the early phase of labour, you may find having a warm bath relaxing. The warm water helps to relieve tension, decrease pain and increase relaxation. When you come into hospital in established labour it may be possible to use the birthing pool. However, the birthing pool isn't suitable for all pregnancies and labours, please ask your midwife when you come into hospital in labour if this is a safe option for you and your baby. We have one birthing pool at Harrogate Hospital, please let us know when you ring up in labour that it is your preference to use the pool.

Birthing pool advantages and disadvantages:

Advantages	Disadvantages
Increases relaxation	It is not suitable for all women in labour – certain pregnancy or labour complications may mean that the birthing pool is not recommended
Can reduce the need for further pain relief such as an epidural	The birth pool may not always be available
The water supports your body and allows freedom of movement to adopt the most comfortable position	
You can use gas & air alongside the pool	
Being in the water doesn't affect your baby	
You remain in control because you can choose to get out at any time	

Gas and air (entonox)

Entonox is a gas that contains 50% oxygen and 50% nitrous oxide. It is inhaled through the mouth via a hand held mouthpiece that is replaced for every patient. You are in control of administering the gas and air. It is advised that you start to breathe in the gas and air as soon as you feel a contraction starting and you should continue to breathe it in until the contraction finishes.

Gas and air advantages and disadvantages:

Advantages	Disadvantages
It takes the edge off the pain	It doesn't get rid of all the pain
You are in control of the mouthpiece and breathing	It may make you feel sick or dizzy
Encourages effective breathing through contractions	It can make your mouth feel dry (drinking to thirst and wearing lip balm can help)
Quick acting – the effects are felt within seconds	
Quick to wear off (this is helpful if you don't like the side effects)	
Doesn't affect the baby	
You can stop taking it at any point and the effects wear off quickly	
It can be used alongside the TENS machine, birthing pool, diamorphine & epidural	

Diamorphine Injection

Diamorphine belongs to a group of drugs called opioids. The dose is calculated based on your weight. It is given as a single injection into the muscle in your thigh or buttock. Due to the side effect of nausea, diamorphine is given with an anti-sickness medication.

Diamorphine advantages and disadvantages:

Advantages	Disadvantages
You may feel like you can cope better with contractions	Doesn't take away the pain completely
You may not feel the contractions as intensely	It is an injection
You may be able to sleep through contractions	It can make you feel sick (your midwife will give an anti-sickness with it)
It can help you to relax	It crosses the placenta and may affect the baby. The baby may be sleepy at birth depending on when the last dose was given. This may also depend on how many doses you have had and how long

	before birth you had your last dose
	It is not recommended to go into the birth pool for four hours after diamorphine is given

Epidural

An epidural is an anaesthetic that goes into your back through a very fine catheter (tube). It works by blocking pain signals to the brain by numbing the nerves in your lower back. An anaesthetist will site the epidural for you. Usually an epidural provides very effective pain relief. Once the epidural is sited it will continue to provide pain relief until it is turned off after the birth. If you feel any discomfort there is the option to top up the epidural to make you more comfortable. One of the side effects of having an epidural is that your blood pressure may become low and this can make you feel unwell. It is therefore recommended that you have intravenous access (a drip into one of your veins) so that it is possible to give you fluids if your blood pressure does fall to help you to feel better. You may not know when you need to open your bladder or feel able to, it may therefore be recommended that you have a catheter (tube into the bladder) sited to help keep your bladder empty during labour. It is also recommended that your baby's heart beat is monitored continuously for a minimum of 30 minutes after you have had the epidural. You will usually be able to get up and walk around approximately 6 hours after the epidural is stopped

Epidural advantages and disadvantages:

Advantages	Disadvantages
It offers complete pain relief for most women	You can't walk around in labour and will be less mobile because you will have reduced sensation in your lower limbs
Your mind stays clear	It takes approximately 30 minutes to complete the procedure and feel the effects
It has little effect on the baby	It may cause your blood pressure to drop which can make you feel dizzy and nauseas
You may be able to sleep through contractions	You will need intravenous access (a drip)
The epidural should last throughout labour and birth	You may not know when your bladder is full and so might need a catheter (tube into your bladder)
The epidural can be topped up and used for pain relief for instrumental births, caesarean sections or if you require any stitches after birth	You will need to be monitored more closely in labour
It brings down high blood pressure	You are more likely to have a longer second stage of labour (pushing phase) which may result in needing forceps or ventouse to help deliver the baby

A midwife is always available in the maternity assessment centre or on delivery suite to talk to if you need some advice or reassurance.

MAC: 01423 557531 (0800-2000) Delivery suite: 01423 553184/5

If you require this information in an alternative language or format (such as Braille, audiotape or large print), please ask the staff who are looking after you.

You matter most