**Patient Information**

**Induction of Labour**

Induction of labour is the process we use to start labour artificially. We use different methods (explained below), to help your cervix (the neck of the womb) to soften and dilate and your uterus (womb) to start contracting. This leaflet is written to help you understand what happens during the process.

**How is labour induced?**

Inductions are carried out on Pannal Ward and you are transferred to delivery suite when you require closer monitoring and one-to-one care.

We use a number of methods during the induction process which are described below in the graph. Please ask your midwife or doctor if you have any questions at any point during this process.

Healthy mum and healthy baby

**Tell your midwife if any of the following happens while you have a Propess in:**

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| * If you experience regular painful contractions (one contraction every 5 mins)
* Severe abdominal pain
* A run of painful contractions occurring more than 4-5 in a ten-minute period
* If your waters break
* If you have any bleeding from the vagina
* If you have any concerns regarding your baby’s movements

We ask you to take special care when wiping yourself after going to the toilet, after washing yourself and getting on and off the bed to avoid accidental removal of the Propess. If you think that the pessary has come out, please inform your midwife **immediately** as the pessary may need to be reinserted.  |

**Keeping mums and babies safe**

Delivery Suite can sometimes be very busy, and this can sometimes mean that the next step in your induction can be delayed as we work to keep all the women and babies in the department safe. If there are delays in your induction process, the midwife looking after you will come and explain why there is a delay to your treatment. You will be kept updated as to when we will be able to continue with your induction.

Throughout the induction of labour process, regular monitoring of your baby’s heart will be undertaken as well as your observations. Please bring sufficient maternity pads with you in addition to your supply for after your baby is born. We often advise you to wear a pad during induction to monitor any loss you may experience.

**Pain relief**

Simple pain-relief is available, as are birthing balls and TENS machines should you require them. Baths can also be very helpful to ease the discomfort of early labour. Further analgesia such as codeine phosphate, diamorphine, Entonox and epidurals are also available if clinically suitable.

**Frequently asked questions:**

**If I go into labour with the propess, what happens next?**

If you are contracting strongly and regularly, your midwife will remove the propess and examine you internally. If you are more than 3cm dilated your labour can now be managed in the usual way. You may not need to have your waters broken or the syntocinon drip if you make normal progress in labour.

**How long will the induction take?**

Induction can take between 24 to 48 hours. The amount of time varies from person to person. Some people go into labour very quickly, in others, it takes time. Please be prepared that it could take 48 hours to get to a point that you are able to have your waters broken or get into labour. Bring plenty to read/music/things to do and be aware that walking around is helpful too.

**Are there any risks?**

Like any drug or medical procedure, induction carries risks, which must be balanced against the potential benefits.

Rarely, women may experience an unusual reaction to the medication and experience strong contractions without a break in between. This usually happens within the first hour after the pessary has been inserted. This is called ‘hyperstimulation’ and can lead to a disturbance in the baby’s heartbeat. If this happens, a midwife and a doctor will come and explain what is happening.

Induction of labour can be associated with an increase in intervention in deliveries, such as requiring an instrumental delivery (e.g. forceps) or a Caesarean section.

Occasionally, despite trying all the induction methods, labour may not begin. If this happens to you, a doctor will come and discuss the next steps with you. The options might include a further stretch and sweep, resting for a few days and starting the process again or a Caesarean section.

**Can my Partner stay with me?**

Your partner is welcome to be with you throughout the induction process. Your midwife will be happy to discuss our ‘partners staying overnight’ policy with you. All other visitors are restricted to normal visiting times of 3:00 – 8.00 pm but you may not feel like having visitors if you are uncomfortable and/or tired so think carefully about what is right for you. You may like to leave the ward for short periods during the second pessary induction in order to keep mobile.

**Please note:** Induction of labour is commenced on Pannal Ward where you may have your birthing partner with you 24hrs a day. If you are wishing for a second birthing partner to be with you, they can join you once you are transferred to delivery suite.

**Coming into hospital for induction**

Once induction has been discussed and offered to you, a date will be given. Please note that you may not be induced on this date as high activity on the unit may require your induction to be delayed. Inductions may also require prioritisation on the basis of clinical need. We do our very best to keep delays to a minimum, but we hope you will understand that these delays are for reasons of clinical safety of mothers and babies already present on the unit.

If you have not received a phone call by 09:30 on the morning of your planned induction date, please telephone Pannal Ward **(01423 553157)** where you will be advised about the current status for your induction or given an appointment to attend MAC. This is to check if your admission may have to be delayed or to arrange an alternative time to attend. You will also be advised if any monitoring for you or your baby is required during this time.

**Further Information**

For further information about induction of labour and all aspects of pregnancy and childbirth, please talk to your Midwife or Doctor.

**References**

NICE (2008) Clinical guideline – Induction of labour. For information about NICE clinical guidelines programme you can visit their website at [www.nice.org.uk](https://www.nice.org.uk/)

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.