



Induction of Labour

This leaflet provides information on what induction of labour (IOL) is, how and why it is performed and to answer some of your questions.

If IOL is offered, a midwife or doctor will explain the reasons why this is advisable for you, ensure you understand the risks and benefits and answer any questions that you may have.

Should you have any further questions, or concerns, please contact the relevant department.

Contact Numbers:

Delivery suite: 01922 656283

Antenatal Clinic: 01922 656577

Fetal Assessment Unit 01922 656249

Ward 25 (Primrose): 01922 656425

For any urgent concerns regarding your pregnancy, please contact Maternity Triage: 01922656967



What is induction of labour and why am I being offered it?

IOL is a process used to start labour artificially.



There are many reasons why you may be offered an induction of labour including:

- Prolonged pregnancy. This is called a 'post-dates induction' where your pregnancy has gone beyond its due date by 10-12 days.
- Your waters have broken but labour contractions have not yet started. Your midwife will advise you in this situation.

If IOL is offered, a midwife or doctor will explain the reasons why this is advisable for you, ensure you understand the risks and benefits and answer any questions that you may have.

If you are currently booked under midwifery care, your care will be transferred to a consultant should you require IOL, however a midwife will still provide care for you in labour.

We offer IOL when the benefits for you and your baby are deemed greater than any disadvantages. Our priority is the continued well-being and safety of you and your baby, and the decision to induce is never taken without discussing it with you fully.

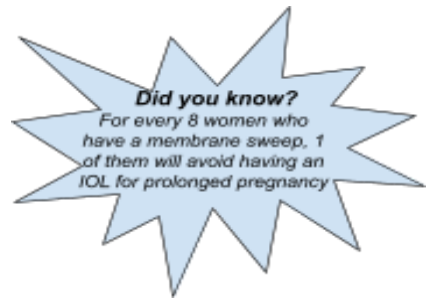
Can anything help bring labour on naturally?

Membrane sweeps can be effective. You should be offered membrane sweeps towards the end of your pregnancy. This is an internal examination that may help your body go into labour. A midwife or doctor places a finger just inside your cervix (neck of the womb) and makes a circular, sweeping movement to separate the membranes from the cervix. This can increase the chances of

labour starting naturally within 48 hours and reduce the need for other methods of induction of labour.

You may find the internal examination uncomfortable and you may experience some bleeding similar to a 'show' following the procedure. This is normal and will not cause any harm to your baby nor will it increase the chance of you or your baby getting an infection.

If labour doesn't start after a sweep, the sweep will usually have helped the cervix become softer, so if induction is required, it may be easier.



How is labour induced?

There are many different ways labour can be induced and the method will depend on different factors which will be explained to by a midwife or doctor.

Labour is usually induced in one or more of the following ways:

1. The cervix is softened using a hormone (called prostaglandin) being inserted into the vagina. There are two types of prostaglandins. The method advised will depend on the reason you are being induced, as well as any previous pregnancy history:
 - **Prostin gel** is inserted into the back of the vagina and works over a six hour period. You may need more than one dose of the gel if the cervix does not soften or dilate enough.
 - **Propress pessary** is a tablet that is attached to a ribbon, similar to a tampon, which is placed inside your vagina. The pessary releases prostaglandins slowly over a 24 hour period and prepares the cervix for labour.
 - **Dilapan** is a rod that is inserted into and gradually absorbs fluids in the cervix. It increases in size which dilates the

cervix and can also encourage your body to release hormones that naturally ripen the neck of your womb.

Dilapan can be offered to you for induction of labour in the following circumstances:

- *If attempts to induce your labour using prostaglandins have not worked.*
- *If prostaglandin poses an increased risk of rupturing your womb (for example women who have had multiple previous deliveries) or a previous Caesarean section.*

2. Once your cervix has ripened we may need to break the waters surrounding your baby (also known as Artificial Rupture of Membranes or ARM).
3. If contractions still do not start, or labour is not progressing as expected, a drug (artificial oxytocin) is given via a drip in the arm.

When using this method of induction, it is advisable to have your baby's heart rate monitored continuously using a CTG. The contractions can feel quite strong with this type of induction, but a midwife will be able to discuss with you and give you information about different methods of pain management.



It is important to remember that your waters may break or your contractions may start naturally at any time during induction.

How long will induction take?

During IOL, the safety of you and your baby is our most important consideration.

Once the prostaglandin is inserted we like you to walk around to help encourage labour, and you can also still shower, eat and drink normally.

It is important to note that the induction procedure can sometimes take a number of days.

The process of induction itself may take hours or even days because:

- You may have to wait for a hospital bed to be available for your admission.
- The process of softening and opening the cervix can take time, and occasionally, may not work.
- There can be a delay before your waters are broken as following this, we need to monitor you and your baby more closely so will require care in a Delivery Suite room.

There may be delays in the system:

- Occasionally, the maternity unit can become very busy with women arriving in labour or needing urgent care. We always prioritise our workload based on medical needs. The midwife and consultant in charge of Delivery Suite will make decisions about who is prioritised.
- In some circumstances, we may have to delay your induction by 24-48 hours, or ask you to come in at a later time in the day. If your baby requires a neonatal cot, the delay can even be a few days until a cot becomes available.

It is important that your support network (e.g partner, family, other children and those caring for them) are aware that IOL can take several days before the baby is born.

What happens once the induction process starts?

When you arrive a staff member will show you to your bed space and explain the ward layout and facilities.

A full antenatal check will be performed by a midwife before starting the IOL. This will include taking your observations, testing a urine sample and an electronic monitoring (CTG) of your baby's heartbeat (for a minimum 30 minutes).

Following this, a vaginal examination is performed and either the chosen method of prostaglandin or Dilapan is inserted before recommencing the tracing of your baby's heartbeat for at least 20 minutes.

We will continue to monitor you and your baby throughout the induction process, the frequency of this will depend on each individual person and will be discussed with you by the midwife caring for you.

Once the induction process has started, we advise you to walk around or use 'birthing balls' to help encourage labour. You will usually have time between examinations to relax and can continue to shower, eat and drink normally.

Can I have someone with me?

- Delivery Suite welcomes *ONE* birthing partner to accompany and stay with you during the induction process.
- Facilities for your birth partner are limited with a reclining armchair available for them to rest.
- Your partner will be required to provide their own food and drink (the hospital has limited food/drink facilities overnight).
- There is a visitor toilet, however no shower facilities.

It is important that you or your birth partner keep family & friends updated as to how you are getting on as staff cannot disclose confidential information over the telephone.

Once you have been moved into a single Delivery room, an additional birth partner may attend to offer ongoing support in labour.

The swapping of birth partners is not allowed except in exceptional circumstances, please discuss this at the earliest opportunity with the Delivery Suite midwife in charge.

What shall I bring with me to the hospital?

Bring your overnight bag and baby's clothes, nappies etc.

As the process can take some time, please bring in books, magazines, card games, tablets etc to help pass the time.

Pack comfortable clothes, ideally light layers you can adjust to suit the temperature. It is not necessary to wear night clothes during the day.

The hospital will provide you with meals and drinks. You can also bring your own food, however there are no facilities to reheat/warm food. The hospital has a restaurant, Costa coffee, cafe and shop located near the main entrance.

You can bring your mobile phone or devices and chargers into the hospital. When listening to devices, please consider using headphones and only make/answer calls when you will not be disturbing others.

IOL Top Tips:

- Do ask if you have any questions or concerns.
- Request a membrane sweep before your planned induction.
- Pack food and drinks plus things to do while in hospital.
- Wear comfortable clothes and footwear.
- Keep active in between examinations.
- Ask your birth partner to keep family and friends updated about your induction progress.

Induction is a safe and routine procedure but is it understandable that you may feel nervous or concerned. The midwives and doctors looking after you will be happy to answer any questions you may have and will endeavour to keep you up to date regarding your induction as it progresses.

More information can be found in the full leaflet about IOL available on the hospital website *insert weblink* or by scanning the QR code *insert QR code*.

Other Leaflets That May Be of Interest These Can Be Found On Your App

NHS
Walsall Healthcare
West Trust

Mother, Family, Pregnancy Pregnancy & Newborn Information

This information booklet is designed for women who are pregnant at Walsall. It has a lot of useful information for you to refer to along with other information leaflets that are available at your Walsall. If there is anything which you're not sure about, or if you need further information, please do not hesitate to call any member of the Maternity Team.

Caring for Walsall together

8 Stages	Time after birth	What baby is doing
Birthcry	After birth	Distraction by stimuli or noises as reassurance to breathe and/or cry
Relaxation	After Birthcry	He is not in movement. He is relaxed. He is slowly breathing and giving me a moment - it's a bit over/under/behind?
Awakening	24 mins	Small fidgeting movements of head and body eyes beginning to open and shoulder movements. Mum smells, feels and sounds familiar!
Activity	4-12 mins	Slightly open eyes, reaching for mouth, hand to breast to touch, tongue protruding in a safe environment to explore!
Rest	Frequent	Lots of 'noisy' after activity in reality now to this - I need to take things slowly as I'm processing and integrating what I've learnt before moving on to the next stage!
Crawling	18-24 mins	Crawling, sitting up and crawling on knees to push forward. Lots of rooting, sucking, playing with feet and holding my Walsall by massage for warmth and gentle approach thinking?
Familiarisation	24-42 mins	VERY important stage - can last 20 mins or more. Looking, nipple, touching, massaging, breast, begins to interact with Mum and Dads. Making Walsall's hormones. Please don't rush me - I need to work this out for myself so I won't need so much help later!
Suckling	48-90 mins	So I start to hear working out how to approach and begin to feed it all by myself - well, perhaps with a little help from them!
Sleeping	90-120 mins	Satisfied, sleepy and safe - life is good so far!

6th Oct 2024 by NHS

NHS
Walsall Healthcare
West Trust

What you need to know about expressing breastmilk before your baby is born

Did you know you can hand express and collect first breast milk called colostrum before your baby is born?

Antenatal expression is particularly useful if you are diabetic, are having a planned caesarean, are having twins or triplets, know your baby is going to be born early or you have a medical condition like high blood pressure.

Antenatal expression means expressing colostrum before your baby is born. You can start expressing from 16 to 37 weeks pregnant.

If your pregnancy is complicated then giving this extra milk may reduce the risk of baby being admitted to the neonatal unit.

You can hand express 2 to 3 times a day for about 5 to 10 minutes. Don't worry if you don't get much, expressing now can help your milk supply increase sooner when baby is born.

Unless you have a planned date to have your baby leave hospital, you can start expressing now to help someone to bring it in when baby is born as it cannot be kept from in hospital.

We can provide you with 1ml syringes and bungs to collect milk in. Use a small sterile container if you can. You can start expressing now to help someone to bring it in when baby is born as it cannot be kept from in hospital.

First- and second-degree tears

Repair of first- and second-degree tears, care of stitches and what to expect when healing

THE BABY FRIENDLY INITIATIVE
unicef
WALSALL HOSPITAL

BUILDING A HAPPY BABY A GUIDE FOR PARENTS

NHS

Healthy Eating

What is healthy eating for diabetes and pregnancy?

- Eat 3 regular meals a day
- Eat at least 5 portions of fruit and vegetables daily
- Eat starchy carbohydrate foods, especially those high in fibre, at each meal
- Eat foods mainly from the four **main** food groups underlined

Fruit & vegetables
Bread, cereals, potatoes & other starchy foods
Meat, fish & alternatives protein foods
Fatty & sugary foods
Milk & dairy

- Avoid sugar and sugary foods and drinks
- Limit foods and drinks high in fat and salt

BETTER BIRTHS
NHS

Personalised Care and Support Planning

What does it mean for you?

- You are the expert on what matters to you.
- You talk about how you would like your pregnancy from health, safety, experience and family considerations.
- What you would like to see, hear and do at different stages in any day that you choose.
- You discuss the care that is best for you.
- We listen to your views and care about your choices.
- You can talk with us, respond, monitor and feedback.
- You can use the plan to discuss your needs.
- We will do our best to meet your needs.

What can you do to prepare for your appointments? Think about what is important to you during your pregnancy. Consider any questions you have.

- What are my options?
- What are the benefits and things to think about for this option?
- What help and information do I need to make my decision?

The Personalised Care and Support Plan: Your healthcare provider will support you to create a plan for your pregnancy and delivery.

For more information about Personalised Care and Support Planning by visiting the QR Code.

Tommy's PregnancyHub
NHS
Pregnancy Support in Walsall

Feeling your baby move is a sign that they are well

Feeling your baby move is a sign that they are well. You can usually feel your baby move between 16 and 24 weeks of pregnancy. A baby's movements can be described as squiggly, little kicks, twitches or rolls. The signs of movement may change as your pregnancy progresses.

How often should my baby move?

There is no set number of movements. You should feel your baby move often and regularly. You should feel your baby move often and regularly.

DO NOT WAIT until the next day to seek advice if you are worried about your baby's movements

Get to know your baby's movements.

Why are my baby's movements important?

- As a doctor or health professional, you can monitor your baby's movements to see if they are well.
- It can help you to see if your baby is well.
- It can help you to see if your baby is well.

What if my baby's movements become reduced again?

If you notice your baby's movements becoming reduced again, you should contact your midwife or health professional. You should contact your midwife or health professional if you notice your baby's movements becoming reduced again.

Find out more at www.tommys.org/pregnancy-hub

If you require access to your app email: walsallmaternity.notessupport@nhs.net

