

## What can reduce the need for an induction?

### Membrane sweep (*Stretch and sweep*)

This can be done by your lead maternity carer at home or in clinic, and is usually offered when you are 40 weeks pregnant. It involves having a vaginal examination where the membranes are gently separated from your cervix. Hormones are then released that may help to prepare your body for labour. Ask your LMC if a sweep is needed and the best time to do this.

### Is there anything I can try myself?

Most home remedies to start labour are unsuccessful and some are harmful. If you are considering trying a home remedy discuss it first with your LMC.

## More Information

1. Talk to your lead maternity carer
2. Look at the following resources:

About induction of Labour-information for pregnant women - NICE Guidelines 2008:

<http://www.nice.org.uk>

The National Health Service UK 'Induction of Labour' video:

<https://www.nhs.uk/pregnancy/labour-and-birth/signs-of-labour/inducing-labour/>

<https://www.kiwifamilies.co.nz/articles/induction-detail/>



**Waitemata**  
District Health Board

Best Care for Everyone

# Induction of Labour

*What you need to know*

## Induction of labour

### What is induction of labour?

For most women labour starts naturally, but sometimes labour needs to be started medically. The process of medically starting labour is called induction of labour.

### Why is induction of labour being recommended?

Induction of labour is recommended if you are well past your due date (over 41 weeks) or if there are concerns about your pregnancy that mean that it is safer for your baby to be born than to wait for natural labour. Timely induction of labour can reduce the chance of stillbirth for some babies.

## Your options

Your Lead Maternity Carer (LMC) and the obstetric doctor will explain why induction of labour is being recommended, the risks and benefits of this, and any alternatives available to you if you choose not to be induced.

You will have time to ask questions and consider your options before making a decision.

## Methods for inducing labour

### Misoprostol

This medicine is given as a drink, it causes your cervix to soften just as it does in normal labour and starts contractions. It is given every 2 hours until you are in labour so you need to stay in hospital while you are being induced with misoprostol.

### Breaking the waters

This involves breaking the membrane sac around the baby with a tiny hook during a vaginal examination. This can only be done if the cervix is dilated enough to allow this to happen.

### Syntocinon drip

This is a hormone that is given through a drip into a vein and is increased at regular intervals until the contractions become regular and strong. Your baby's heartbeat and your contractions are monitored continuously.

### Balloon catheter

This is a small tube that is inserted through your cervix, and a tiny balloon is inflated which presses on the cervix and encourages it to dilate. It stays in for 24 hours or until labour starts. If your pregnancy has no complications you have the option of going home while the balloon is in.

## Risks of Induction of labour

Induction of labour does have some side effects and risks for you and your baby so it is not something that is recommended without a good reason.

- Induction of labour can take time, sometimes two or three days. Sometimes it does not get labour started at all.
- Sometimes labour can happen very quickly causing a rapid birth.
- Some people are very sensitive to the medication and it can cause sudden strong and very frequent contractions that can reduce blood flow to your baby. Both you and your baby will be closely monitored throughout the induction process
- The labour pain sometimes builds up more quickly
- Induction of labour may increase your chance of needing a caesarean birth.
- You have an increased risk of heavy bleeding following the birth.