

What is induction of labour?

Labour is a natural process that usually starts on its own. Sometimes labour needs to be started artificially; this is called 'induced labour'.

Why you might be offered induction?

Most women have a normal pregnancy and a normal birth, but sometimes it can be best to induce labour:

- To avoid a pregnancy lasting longer than 41 weeks (known as a prolonged pregnancy), or
- If a woman's waters break but labour does not start.

The most common reason for induction is to avoid a prolonged pregnancy.

We would offer to discuss this with you at your 38th/39th week antenatal appointment.

You may be offered induction if you are more than 34 weeks pregnant and your waters break, but labour has not started on its own after 24 hours.

If your baby is larger than expected, you should not normally be offered induction for this reason alone. Induction should not be offered to avoid you giving birth without your obstetrician with you if you have given birth before and the labour was very quick.

If you are offered induction

We would explain

- why you are being offered induction.

- the risks and benefits, explain the alternatives, and encourage you to look at sources of information.
- when, where and how labour can be induced, and about pain relief options .
- options would be if inducing your labour doesn't work

You would be given plenty of time to discuss induction with your family before making a decision, and we will support you in whatever decision you make. If you choose not to go ahead with induction, your obstetrician will discuss your care options with you.

Before you are offered induction

Before you are offered induction, you would be offered a membrane sweep to help you go into labour before 41 weeks. This involves placing a finger into the cervix and making a circular, sweeping movement to separate the membranes that surround the baby, or massaging the cervix if this is not possible. It may cause some discomfort, pain or bleeding, but makes it more likely that you will go into labour naturally. You should be offered a membrane sweep at your 39th week antenatal appointments during your first pregnancy, or your 40th week antenatal appointment if you have had a baby before. If labour does not start after this, additional membrane sweeps may be offered.

Before you are induced

Your baby's heart beat would be checked using sensors attached to your abdomen beforehand. Your cervix would also be examined.

What happens during induction?

During induction, you will be given drugs that act like the natural hormones that kick-start labour. These drugs are called prostaglandins.

Prostaglandins would be inserted into the vagina as a gel or tablet or tablets given by mouth and this would be usually done in the morning. Your cervix would be re-examined after 6 hours if you have had a tablet or gel. Your baby's heartbeat would be checked again when contractions begin.

Amniotomy is a method of induction in which weals artificially break the waters. You wouldn't normally be offered an amniotomy unless we think there may be specific problems with using prostaglandins or if your cervix is already open and/or thin.

Pain relief

Induced labours are often more painful than spontaneous labours. You should be offered support and whatever pain relief is appropriate to you – in the same way as if your labour had not been induced. You would be encouraged to use your own coping strategies for pain relief

If induction doesn't work

If you don't go into labour after induction, we will discuss this with you, and check on you and your baby thoroughly.

Depending on your wishes and circumstances, we may offer you another dose of prostaglandins. In some circumstances, you may be offered a caesarean section.