

Your important health information

Induction of labour

This information is to provide information to you and your family about induction of labour and to answer questions you may have. It is important that you are fully informed if induction of labour has been recommended. Once you and your health care provider have agreed on an induction of labour, you will be asked to sign a consent form.

Induction of labour means starting labour before its natural onset. An induction of labour is usually recommended when the risks of continuing the pregnancy are greater than the risks of having your labour induced. An induction of labour may also be recommended when it will benefit your health or your baby's health.

Common reasons for induction of labour include:

- you have health problems such as high blood pressure or diabetes
- your baby is not growing well
- the bag of water around your baby has broken, but labour has not started naturally.

Please note

Your induction may be delayed if there is high activity in the birth suite.

The midwife or doctor will call you to let you know if this happens and a new time or date will be discussed with you. The Obstetrician will take into account your pregnancy history, risk factors and personal circumstances when making this decision.

You can call the birthing suite at any time to discuss any concerns regarding your pregnancy.

How is labour induced?

Before an induction, your doctor or midwife will perform a vaginal examination to assess your cervix (neck of the womb) and decide the best method of induction for you. One method or a combination of methods may be used; your doctor or midwife will recommend the best method for you.

Method of induction	Description
<p>Prostaglandin</p> <ul style="list-style-type: none"> <input type="checkbox"/> Prostin (gel) <input type="checkbox"/> Cervidil (pessary-vaginal tablet) 	<p>Prostaglandin is a hormone that prepares your body for labour. The hormone is available in the form of a gel (Prostin) or pessary (Cervidil). The hormone is inserted into the vagina. This will help to soften and open your cervix.</p> <p>When prostaglandin has been inserted:</p> <ul style="list-style-type: none"> • you will need to lie down for approximately one hour • you may feel uncomfortable crampy pains. Your midwife will be able to assess these pains and offer you pain relief if needed. <p>Prostin – Most women being induced with their first baby will need more than one dose of the hormone when given in gel form. Your doctor or midwife will perform a vaginal examination 6 hours after the first dose to decide whether a second dose of gel is needed.</p> <p>Cervidil – Your doctor or midwife will perform a vaginal examination 12 to 14 hours after the pessary was inserted, to remove it and reassess your cervix.</p>
<ul style="list-style-type: none"> <input type="checkbox"/> Balloon catheter 	<p>Balloon catheters are a safe and effective method of preparing the cervix for labour.</p> <p>A speculum examination (similar to a cervical screening test) is performed to insert a thin tube through the cervix. Once in place, a small balloon in the catheter is filled with fluid. This helps release natural hormones to soften, open and shorten the cervix. The end of the catheter is taped to your thigh and you are able to wear underwear as usual.</p> <p>The balloon catheter may fall out as your cervix opens. Some women can return home once the catheter has been inserted.</p>
<ul style="list-style-type: none"> <input type="checkbox"/> Artificial rupture of membranes (ARM) 	<p>ARM means breaking the bag of water around your baby. Your cervix needs to be slightly open to break the bag of water. A doctor or midwife will perform a vaginal examination and ‘break your waters’, usually with a small hook or forceps.</p> <ul style="list-style-type: none"> • This will be recommended if your cervix is already soft and open • You may need to have the prostaglandin or balloon catheter first to help open your cervix. (see above)
<ul style="list-style-type: none"> <input type="checkbox"/> Oxytocin 	<p>Oxytocin is a hormone that causes your uterus (womb) to contract. Most women being induced will need this hormone to start labour.</p> <p>Oxytocin is given through an intravenous drip, starting at a low dose and slowly increasing until labour becomes established. It may take a few hours for your contractions to be regular and efficient.</p>

Monitoring

Your baby's heart rate will be monitored before and after insertion of the hormone or balloon catheter. Once regular contractions or the hormone drip begin, continuous monitoring is needed. This enables us to make sure baby is not becoming distressed by the contractions. Your ability to move around will be limited by the drip and continuous monitoring. You do not need to stay in bed and will be able to kneel, sit or stand for comfort. A small number of cordless monitors are available to allow you to move more freely.

Women going home after insertion of balloon catheter

If you have a low risk pregnancy, you *may* be able to return home after your balloon catheter has been inserted (Mercy Hospital for Women only). If this is the case, you will receive a phone call 8 to 12 hours after insertion of the catheter to check on your wellbeing.

If you develop

- abdominal pain
- vaginal bleeding
- breaking of the waters
- reduced movements of your baby
- or any other concerns, please call the birthing suite

When calling the birthing suite for any reason, you must tell our staff that you have a balloon catheter in place.

If your catheter falls out, call the birthing suite for further advice. This occurs commonly and is safe for you and your baby. You may be advised to stay at home until the morning or to come back into the hospital

Potential risks

The chance of a complication occurring during induction of labour is very small.

These are the more common risks associated with induction of labour:

- The first method used to prepare the cervix may not work and an additional method may be used.
- Balloon catheter may increase the risk of bleeding from the cervix.
- ARM (breaking your waters) may increase the risk of infection. Very rarely cord prolapse (where the umbilical cord comes through the cervix before the baby is born) can occur. A caesarean section is required if a cord prolapse occurs.
- The hormone drip may cause you to contract too often (more than 4 contractions in 10 minutes). If this occurs your baby's heart rate pattern may change. The hormone may be reduced or stopped. In some cases a caesarean section may be required if this occurs.
- The induction may be unsuccessful if it does not start labour or does not cause your cervix to open. If this occurs a caesarean section may be needed or the induction may be delayed.

There may be other risks that are less common or specific to your clinical situation. Your doctor or midwife will discuss these with you where relevant. The risks associated with induction of labour need to be compared with the risks of waiting for labour to start naturally. Please ask your doctor/midwife if you have any concerns.

Admission

Upon booking your induction, your doctor or midwife will provide you with a timeframe for when your induction will be scheduled for.

Follow the instructions below for your hospital:

<p>Mercy Hospital for Women, Heidelberg</p>	<p>One to two days before your induction, you will receive a phone call to advise you of the date of your induction and what time to arrive.</p> <p>Call Birthing Services Unit (BSU) on 8458 4618 if you have not received a phone call with your induction date by _____</p> <p>If you need:</p> <ul style="list-style-type: none"> <input type="checkbox"/> two doses of prostaglandin gel arrive for 7.30am on the date provided. (Weekdays Fetal Monitoring Unit, weekends Birthing Services) <input type="checkbox"/> one dose of prostaglandin gel or pessary (Cervidil) arrive for 1pm on the date provided <input type="checkbox"/> a balloon catheter please call Birthing Services 8458 4618 on the date provided at 8am <input type="checkbox"/> your waters broken and the hormone drip please call Birthing Services 8458 4058 on the date provided at 5:30am. <p>Go to Admissions on level 1 of the hospital , opposite the Emergency Department reception</p>
<p>Werribee Mercy Hospital</p>	<p>One to two days before your induction, you will receive a text message to inform you of your induction booking and what time to arrive.</p> <p>Call Maternity Assessment Unit on 8754 3398 if you have not received a text message with your induction date by _____</p> <p>Present to the Maternity reception of the hospital.</p> <p>Monitoring and an assessment will be performed in either the Maternity Assessment Unit or Birthing Suite.</p>

This document provides general information only and is not intended to replace advice about your health from a qualified practitioner. If you

For further information, please contact:

Mercy Hospital for Women

Fetal Monitoring Unit
Phone: 03 8458 4268

Werribee Mercy Hospital

Maternity Unit
Phone: 03 8754 3400

Acknowledgements

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are concerned about your health, you should seek advice from a qualified practitioner.