Inducing Labor

What is an induction?

Most pregnancies last approximately 40 weeks and in many instances labor spontaneously begins on its own.

Inductions may be suggested by your provider for specific medical reasons. Convenience or not wanting to be pregnant any more are not examples of medical reasons.

Induction of labor is when you start labor with medicines and/or other treatments instead of waiting for labor to naturally begin on its own. Your health care provider will instruct you if an induction is necessary.

Potential reasons for an induction

There are several reasons why some women may have their labor induced. Through a decision-making process with your provider, an induction may be considered for your delivery. A few reasons why a women may be induced include but are not limited to preexisting medical conditions (diabetes or high blood pressure), preeclampsia or eclampsia, 1 or 2 weeks past your due date, or the bag of waters around the baby breaking early (premature rupture of amniotic membranes.)

How is labor induced?

Your provider may recommend one or more methods for inducing labor:



Amniotomy (breaking the bag of waters): Your provider inserts a sterile plastic tool to help break the water (*membranes of your amniotic sac*) during a vaginal exam. Rupturing these membranes may cause labor to begin.

Mechanical Dilators: These methods may cause the release of hormones through the use of a Cook's catheter or Foley bulb (balloon) catheter. The catheter can be placed inside the cervix and the balloon on the catheter is slowly inflated to help open up the cervix and simulate the pressure of the baby's head.





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<u>Medications</u>: Synthetic hormone-like suppository may by inserted to help thin and open (*efface and dilate*) your cervix. Some medications (*prostaglandins*) may be given orally or vaginally. Misoprostol is a commonly used medication for induction. A Pitocin IV drip may also be used to uterine contractions.



Prostaglandin (Synthetic) suppository



IV infusion of Pitocin

Is it safe?

Inductions can be safely performed by your provider in a medical or hospital setting where you can be monitored and have delivery services available. As with any procedure there may be some risks associated. An induction of labor's most common risk is having contractions that are too close together. Your health care provider will try to stop or slow down the contractions if they are too close or if they are associated with slowing of your baby's heart rate. Some inductions may fail to produce a strong labor pattern and may result in the need for another induction method or a Cesarean delivery.

Questions to discuss with your provider:

- Why is an induction being recommended for me at this time?
- May I wait to induce until 39 weeks?
- How will my labor be induced?
- Is it safe for me to be induced?
- Is there a risk that I may need a cesarean section?

For more information concerning inductions:



Pregnancy and Birth: When does Labor Need to be Induced: <u>Pregnancy and birth:</u> When does labor need to be induced? InformedHealth.org - NCBI Bookshelf (nih.gov)



Inducing Labor: When to Wait, When to Induce: <u>Inducing labor: When to wait, when to induce - Mayo Clinic</u> <u>Labor induction - Mayo Clinic</u>

