

How do I know when labour starts?

Introduction

Many women may be uncertain about the start of labour and when they should go into hospital. This leaflet will help you and your birth partner understand the process of labour and includes information on what to expect during this time. It also provides suggestions for ways of coping with contractions at home and guidance on when to contact your midwife for home birth, or when to come in to the hospital or Birth Centre. Please remember that every woman's labour is different, and it will be an individual experience to you.

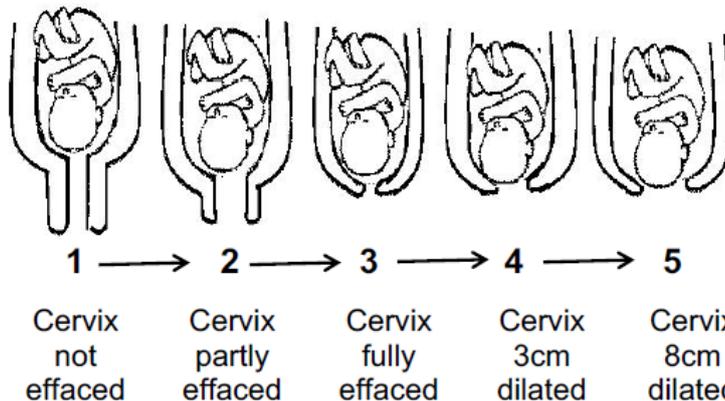
What is labour?

Labour is a process that involves 3 stages:

- **The first stage of labour** - where you will experience contractions as the cervix opens (dilates) to 10cm
- **The second stage of labour** - where you will push the baby through the birth canal and the baby is then born
- **The third stage of labour** - where the placenta (after birth) is delivered

During the first stage of labour, the cervix starts to change. At first it softens and the length of the cervix shortens usually before it starts to dilate, this is known as effacement. The cervix usually starts off closed and then opens (dilates) in labour to 10cm, known as fully dilated. This happens when the uterus contracts regularly and strongly over a number of hours.

Image of cervical effacement (shortening) and dilatation



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The differences between early and established labour: What you need to know

The first stage of labour is in 2 phases; **early labour**, also known as the latent phase and **established labour**, also known as the active phase.

Early labour is a period of time when there are contractions, which can be painful, and the cervix is beginning to change; it will be shortening and thinning and opening up to 4cm. This is when your body is preparing for labour.

Established labour is the next stage, contractions become more intense and the cervix will then open further from 4cm to 10cm.

Your baby will gradually move down into your pelvis. This is when your body is in active labour.

There are noticeable differences between the 2 phases and this guide should help you to tell the difference between the two while at home.

Latent Phase	Active Phase
Contractions are present, but often are:	Contractions are present, but are now:
Irregular in pattern and strength, some may be strong while others mild	Regular and similar in both strength and frequency
Infrequent , 1 contraction every 5 to 10 minutes or even further apart than this	Frequent , every 3 to 5 minutes
Painful but manageable	All contractions painful
Can be short lasting (30 to 40 seconds) or very long (1 to 2 minutes)	Consistently lasting 45 to 60 seconds on average
Contractions may depend on your position; less when you are lying down and more frequent when you are standing. This is very common in the early stages	Contractions will continue to be regular no matter what position you are in
Contractions may start for a few hours and then stop; this can often last for a couple of days	Contractions will be continuous

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Other signs of the early stage of labour

There is no definitive sign to say that early labour has begun, but you might experience one or more of the following:

- **A 'show'** from the vagina, the coming away of the mucous plug which has a jelly like appearance, sometimes clear, sometimes streaked with blood or brown in colour. This can happen days before the birth of the baby and many women have several shows. A show is common after having an internal examination. This is normal
- **Backache, period type pains or irregular contractions.** As previously described, these can last a few days and nights, or may stop and start. They can be uncomfortable but this is normal
- **Waters breaking** does not always mean that you go immediately into labour, but is usually a sign that you might in the next 24 hours. Your waters may not break until the end of your labour. You should contact your chosen place of birth immediately if you have either a leaking of fluid or a big gush of fluid. You should wear a sanitary pad

What you can do in early labour to help yourself

When labour begins it is a very exciting time for you and your family and many women are keen to get into hospital to have their baby. Labour, particularly when you are having your first baby, can be a lengthy process with the early stage often the longest part. This can last on average 12 to 14 hours but in some cases it can last several days. If you think your labour has started you can contact the unit where you intend to give birth. A midwife will be happy to offer advice over the phone. The contact details are on at the end of this leaflet.

During the early stages of labour, you will usually be encouraged to stay at home. This is because research shows that while you are at home in familiar surroundings, you are likely to be more relaxed. This, in turn, can increase your natural hormones (oxytocin) which encourage labour.

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Evidence also suggests that if you can rest; move freely (rather than being confined to a hospital room or busy ward); keep well hydrated and eat as you feel like it, you are less likely to have medical interventions including an epidural, instrumental delivery or even caesarean.

In the very early stages, we recommend you rest between contractions to try to save your energy for the later stages. If you feel unable to rest we recommend you try the techniques in the next section.

Things to try in early labour

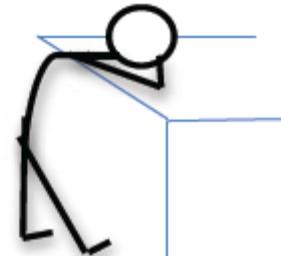
- Distraction methods such as TV, music, DVDs
- Take a gentle walk
- A long soak in the bath or shower can help you to relax
- Eating small snacks (little and often) to keep up your energy levels
- Drink plenty of fluids to stay well hydrated
- Use a TENS machine (Transcutaneous Electrical Nerve Stimulation), these can be hired online or from some pharmacies/chemist
- Relaxation techniques such as massage or relaxed breathing
- Take paracetamol every 4 to 6 hours as directed on the packet to help with the discomfort
- Try different positions as one may help more than another (see pictures for position examples). Lying on your left side with a pillow between your knees can help you to relax between contraction

If you are tense and fearful, your body can release adrenaline which can slow labour down. Try to keep as calm as possible through the labour process. It is also important that your birth partner(s) also try to remain calm.

Positions and activities to try in labour



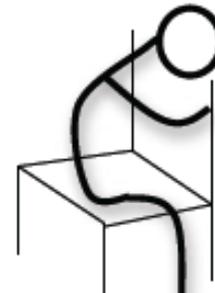
Walk up
stairs



Lean forward
onto a counter
or table



Sit upright on a
birthing ball



Sit and lean forward
onto the back of the
chair



Kneel forward leaning
your head on a pillow



Kneel forward onto
a birthing ball

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Kneel on the floor
and lean forward
onto a chair



Stand and rock while
holding onto your
birthing partner

During the early stages of labour

If you have any of the following concerns please contact a midwife immediately:

- Bright red 'fresh' vaginal bleeding
- Concerns about your baby's movements
- If you think your waters may have broken

What to expect if you come into hospital or when your midwife visits you in labour at home

The midwife will perform basic observations such as blood pressure, temperature, pulse and a urine dipstick test. The midwife will also feel your abdomen, check which position your baby is in and listen to the baby's heartbeat.

The midwife will ask you about what's been happening with you and your baby.

She will have many questions about contractions, whether your waters have broken, about the baby's movements and how you are feeling. You will then discuss the next steps with the midwife and this may or may not include a vaginal examination. If you are in early labour, and after careful discussion between you and your midwife, a plan of care will be agreed. If all is well with you and your baby your midwife will encourage you to return home until your contractions become stronger and more regular.

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You are reminded that you can telephone your chosen place to birth at any time of day or night. A midwife will be happy to offer support, advice and reassurance.

Contact information**Gloucester Birth Unit**

Tel: 0300 422 5523

Cheltenham Birth Centre

Tel: 0300 422 2324

Gloucester Delivery Suite

Tel: 0300 422 5542

For further advice and support contact your intended place of birth (the telephone number is on the front of your orange notes).

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