Induction of Labor





What Is Labor Induction?

Labor induction is the use of medications or other methods to start (induce) labor instead of waiting for it to start naturally.

When might induction be recommended?

- If you have a medical condition, such as high blood pressure or uncontrolled diabetes, which may worsen while you are pregnant
- If your baby has a medical problem, such as not growing well or not having enough fluid around them, and it may be better for them to be born than for your pregnancy to continue
- If you are 1 to 2 weeks past your due date

When is induction not recommended?

- When you are less than 39 weeks pregnant, and you and your baby are healthy
- When there is a reason that it might be better for you to give birth by cesarean section (C-section), such as:
 - · You had a previous surgery on your uterus
 - You have an up-and-down (vertical) incision from a previous C-section
 - There are herpes sores or blisters in or near your vagina
 - Your baby is not in a head-down position
 - Your placenta covers part or all of the opening of your cervix

What are the risks of labor induction?

- Longer labor and hospital stay current data shows it takes 44 hours on average for induced patients to have their babies
- Increased need for pain medication or an epidural
- · Decreased ability to move around the labor room
- · Increased risk of infection
- Increased risk of bleeding too much after delivery (hemorrhage)
- Increased risk of your baby needing care in the Neonatal Intensive Care Unit (NICU)

How Is Induction Done?

There are several methods to start labor if it has not started naturally. One is called ripening the cervix. This procedure helps the cervix to soften and thin out so it will open (dilate) during labor. This process may begin in your doctor's office.

If you are induced in the hospital, you will be given an IV for fluids and medications. Two soft belts will be placed around your belly and attached to monitors that will closely monitor your baby's heart rate and your contractions.

Sometimes your health care provider may need to use one or more ways to ripen (soften) your cervix, including:

Placing a cervical ripening balloon

Your health care provider will place a thin tube (catheter) that has an inflatable balloon on the end into your cervix. The balloon is expanded with sterile water and puts gentle pressure on your cervix to slowly open it. The balloon will fall out when your cervix is dilated to between 2 and 4 centimeters, or it may be removed after 12 hours. You might feel mild pressure and cramps in your pelvic area when the balloon is first placed.



Prostaglandin medications

Misoprostol (Cytotec)

Misoprostol softens your cervix for labor, and sometimes it will cause contractions and start your labor. Your health care provider may put this pill in your vagina, behind your cervix, or you may take the pill by mouth. You may need up to 6 doses in a 24-hour period before your labor starts. This option is not available if you have had a C-section. Sometimes, your health care provider may recommend using both the pill and a cervical ripening balloon to help speed up the induction process.

Dinoprostone (Cervidil)

Dinoprostone is similar to the natural prostaglandins (hormone-like compounds) found in your body. Your health care provider will place this medication, which is on a soft string, in your vaginal canal, behind your cervix. Once the medication is placed, you will be on bedrest for 2 hours. You may feel mild cramping. The medication will stay in place for 12 hours. Then your health care provider can easily remove it by pulling the string, similar to removing a tampon.

Other Induction Methods

If your labor has already started but is going slowly, your health care provider may use one or more methods listed below to help speed it up. This is called augmentation of labor.

Stripping or sweeping of membranes

If your cervix is dilated, your health care provider may use two gloved fingers to gently separate the bag of water (amniotic sac) from the side of the uterus. This causes your body to release prostaglandins, which act like hormones to soften your cervix and make it easier to open. Stripping the membranes does not break the bag of water and does not always start labor. You may feel cramping or contractions and have a small amount of vaginal bleeding.

Oxytocin (Pitocin)

Oxytocin is the hormone in your body that makes the uterus contract. This medicine makes your contractions stronger, more effective and more efficient. You will receive this medication through an IV. Oxytocin is given slowly, and it may take many hours before active labor starts.

Scheduling Your Induction

You and your health care provider will decide the best date for your induction. Your health care provider will schedule the date with the hospital's Labor and Delivery Department.

Call the Labor and Delivery Department at least

1 hour before your scheduled induction time to make sure your induction time and date have not changed. It is possible your induction time or date may change due to a change in your medical needs or the number of patients in labor and delivery that day.

Labor and Delivery Departments

Sharp Chula Vista Center for Women & Newborns 619-502-5990

Sharp Mary Birch Hospital for Women & Newborns 858-939-4350

If you have any questions about the labor induction process, please speak with your health care provider.

Thank you for choosing **Sharp HealthCare** for your delivery.

Your health care provider has recommended an induction of labor. We understand this may not be part of your birth plan, and we are here to support you every step of the way. Our goal is to make sure you and your baby are safe, and that you feel informed, cared for and confident throughout your labor and delivery.

Sharp Chula Vista Center for Women & Newborns 619-502-5800

Sharp Mary Birch Hospital for Women & Newborns 858-939-3400

