

INDUCTION OF LABOUR

Where: South Health Campus
4448 Front Street SE
Family Maternity Place Unit 76 – 7th Floor

When used for the right reasons, induction of labor can have benefits for both mom and baby. Inductions should be used only when the risks of continuing the pregnancy outweigh the risks associated with delivery.

Why do I need an induction?

There are several reasons why an induction may be recommended, and your doctor will discuss these with you. Some reasons include the following:

Reasons related to the baby

- Past 41 weeks' gestation
- Indications of stress, such as decreased fetal movements or concerns about the fetal heart rate
- Small for gestational age

Reasons related to the mother

- Blood pressure disorders in pregnancy
- Infection
- Maternal age of 40 or older
- Bleeding
- Cholestasis of pregnancy (a liver condition occurring in late pregnancy that triggers intense itching, usually on the hands and feet)

What is a social induction?

A social induction is when labour is started for non-medical reasons, such as maternal convenience.

On the basis of current research, our maternity group does not encourage your undergoing a social induction if you have any of the following:

- Diet-controlled gestational diabetes
- Suspected large-for-gestational-age fetus (ultrasound showing a fetus in the greater than 90th percentile)
- Maternal exhaustion
- Post dates pregnancy under 41 weeks

If a social induction is required, all patients will be required to sign a written consent form.

In preparation for an induction, the clinic and hospital have a protocol in place to schedule your induction date and time based on availability and priority. We thank you in advance for your understanding and patience with this process.

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What happens during an induction?

There are several ways that your doctor can try to encourage labour. Depending on your situation, your doctor may do the following:

- Ripen or dilate the cervix – If your cervix is not ready for labour, cervidil (a flat vaginal insert about the length of a tampon) or a balloon catheter may be used to make the cervix soft and more responsive to oxytocin. You may go home for a number of hours after this type of induction is started (to allow time for your cervix to soften and open) and be asked to come back to Unit 76.
- Induce contractions by either breaking your water and/or starting oxytocin, which causes the uterus to contract and opens or dilates your cervix. Oxytocin is a hormone that is made naturally in your body; however, during an induction, a synthetic version of this hormone is given through an IV. Other drugs are sometimes used to induce labour in specific situations.

Are there risks?

Most of the risks of induction are the same as when a woman goes into labour naturally. There is a small chance of overstimulation or uterine rupture.

Some additional complications include

- Change in fetal heart rate
- Increased risk of infection in the mother and baby
- Umbilical cord problems

To help prevent these problems, the fetal heart rate and force of contractions are monitored with most types of induction.

How do I prepare?

In addition to these instructions, prepare for an induction as you would for naturally occurring labour.

- Before leaving for the hospital, please eat a light meal and have a shower
- Make sure you bring your bag to the hospital – depending on how fast your labour progresses, you may need to stay. Please leave the baby's car seat in the car until the day you are discharged to go home.