

MANAGING THE EARLY STAGES OF LABOUR AT HOME

Before labour begins

You may experience sensations that feel like labour before starting active labour. Sometimes called “false labour,” these sensations occur while your body is slowly preparing for the delivery of your baby. In early labour, the cervix can soften, thin, and begin to dilate. Early labour dilation is from 0–4 cm, after which time it becomes active labour. Early labour can last for several days before you go into active labour. During this time, you may notice one or more of the following signs:

- Braxton Hicks contractions (mild pre-labour tightening) may increase but tend to stay at about the same length, strength and frequency
- Increased vaginal discharge
- Increasing backache and restlessness
- Several soft bowel movements

Your baby’s movements should not change during this time. Continue with your fetal movement count sheet if your doctor has requested that you keep one. Remember that no one knows for sure what triggers labour, and every woman’s experience is unique. Sometimes it’s hard to tell when labour begins. Don’t hesitate to call your health care provider if you’re confused about whether you’re in labour.

How to cope before labour

- False labour can be an exciting and frustrating time for mothers. During false labour, it may be helpful to avoid telling family and friends. While it is great to have someone to talk to, people constantly asking if the baby has arrived may add to your frustration and anxiety.
- Try to distract yourself and carry on with normal activity as long as possible.
- Make sure your bag is packed and all arrangements have been made.
- Now is the perfect time to rest. Save your energy for active labour and life as a new mom.

The start of labour

As your labour becomes more active, you may notice one or more of the following signs:

- Contractions are becoming longer, stronger, and closer together.
- “Bloody show” (vaginal discharge of thick mucous with a pink or red tinge).
- The sac (also called membranes) surrounding your baby contains fluid called amniotic fluid. The sac can break at any time. When this happens, the fluid will leak from your vagina. You may feel just a trickle, or it may occur in a sudden gush. The colour of the fluid should be clear. When this happens, you should go to the hospital.
- Loose bowel movements may continue.
- It is common to feel excited, relieved, and nervous.

How to cope during labour

- Try to keep your mind active and continue your usual activity as long as possible so that you do not become preoccupied with labour.
- Count the number of contractions in 15 minutes once every hour. If there is no difference in how long, strong, or close together the contractions are, stop timing. Start again when there is a change.
- Eat easily digested foods (such as toast, cereals, or pasta) and drink plenty of fluids. Try to drink one glass of water, juice, or milk every hour.
- If your membranes have not broken, you can have a warm bath. If they have broken, have a shower instead.
- Mental exhaustion and uncertainty is completely normal. It is important to take frequent mental breaks. Try practicing relaxation techniques, listening to calming music, or going for a walk.

MANAGING THE EARLY STAGES OF LABOUR AT HOME

When to go to the hospital

Each woman experiences labour a little differently. It is important to trust your body and go to the hospital whenever you feel most comfortable. The general rule of thumb is to head to the hospital

- If you have a decreased fetal movement count
- When your contractions are 5 minutes apart, lasting 60 seconds, and you have had this activity for about an hour
- It is difficult to breathe through your contractions

Go to the hospital IMMEDIATELY

- You have bright red vaginal bleeding
- You feel constant abdominal pain that does not go away
- You develop a fever (feel hot or shivery)
- Your baby's movements have slowed down (less than six movements in a two-hour period) or stopped
- Your membranes have ruptured

What to expect at the hospital

When you get to the hospital, the admitting staff will want to know the following:

- When the contractions started
- How far apart the contractions are, their length and intensity, and if you are using breathing techniques
- Whether your water has broken, the time it broke, and the color of the fluid
- If a bloody show is present

When you arrive at labour and delivery, a nurse will check your blood pressure and temperature and may order labs or urine samples. The nurse will also place a monitor on your stomach to check on your contractions and the baby's heart rate. The nurse or on-call doctor may also perform a vaginal exam to evaluate the dilation and effacement (thinning) of your cervix. Depending on your stage of labour, contraction pattern, dilation, and the baby's heart rate, you may be admitted or you may be told to return home until the contractions are closer together. If you are sent home, just think of it as a practice run for the real thing.

If at any time you feel unsure or have questions about your pregnancy or labour, please do not hesitate to call the clinic. If the clinic is closed, please call Health Link at 811.

Reference:
CRHA Managing Early
Labour at Home
[www.babies.sutterhealth.org/
labouranddelivery/labour/index.html](http://www.babies.sutterhealth.org/labouranddelivery/labour/index.html)