

AN INFORMATION LEAFLET FOR WOMEN WHEN WATERS HAVE BROKEN BEFORE LABOUR HAS COMMENCED.

What does 'waters broken' or 'ruptured membranes' mean?

The bag of waters around your baby has broken allowing the fluid from around your baby to leak. This might be at the back of the baby's head (hind water) or fore water, in front of the baby's head. Wherever the water is draining from, the advice to you will still be the same.

WHEN WILL LABOUR START?

This varies. Usually, your waters break during labour when the neck of the womb is opening. However, approximately 6-19% of women between 37-40 weeks of pregnancy experience spontaneous rupture of the membranes before labour begins.

Studies have shown that most women will go into labour within 24 hours of the waters breaking. If you leave it up to 2-3 days, the chances of labour starting increase slightly more. However, 6 out of 100 women will not go into labour on their own once their waters have broken and the inducement of labour is necessary.

WHAT ARE MY CHOICES WHEN MY WATERS HAVE BROKEN?

- To await events- (expectant management),
- To have your labour started or induced- (active management).

There are benefits and drawbacks to both these choices.

Benefits and drawbacks of 'wait and see'

BENEFITS

This time allows nature to take its course and you will spend the time waiting for labour to start in the comfort of your own home with friends/family around you.

DRAWBACKS

There is a slightly increased risk of infection. Therefore, we recommend that you take your temperature every 6 hours and inform us if you do not feel well. We have

taken a vaginal swab why you were in the hospital, and we will test this for any signs of infection, and we will contact you if we find a problem.

Benefits and Drawbacks of Inducing Labour

There are 2 ways that we can Induce labour, they are:

- Using a hormone jelly (Prostin) to the neck of the womb, to make the neck of the womb soft and stretchy.
- OR by using a hormone intravenous drip (Syntocinon) to help the womb contract.

Occasionally it is necessary to use a combination of the two methods.

BENEFITS.

The use of Prostin is said to be the next best thing to starting in labour yourself.

The use of Syntocinon is known to shorten the length of labour.

DRAWBACKS.

Vaginal examinations tend to be more frequent in the Induction of labour with the possibility of increasing the risk of infection. Several doses of gel may be needed given over 1 to 2 days. Using a Syntocinon drip increases the strength and frequency of contractions. We will need to monitor your baby's heart rate regularly throughout the Induction process and continuously until you have your baby if the drip is used.

If Induction of labour is unsuccessful a Caesarean Section will need to be performed.

WHICHEVER CHOICE YOU MAKE WE WIL SUPPORT YOU.

WHAT HAPPENS IF I CHANGE MY MIND AND WANT MY LABOUR STARTED OFF?

This is your choice. Ring the delivery suite telephone number at the end of this leaflet and speak to a midwife on the Delivery Suite. We will accommodate your wishes as we are able to do so.

If you decide on the 'wait and see' method you will be discharged home with an appointment to return to the Fetal Assessment Unit (or Delivery Suite at weekends) for an antenatal check, temperature check and a monitoring of your baby's heart rate. If labour does not start spontaneously within 36 - 48 hours, you will be given a date for the Induction of labour on the Delivery Suite or Maternity Ward.

If you choose to have your labour Induced you will be admitted to the Delivery Suite or the Maternity Ward where you will be reviewed by a Doctor, Induction of labour will be discussed with you and a plan of your care will be decided. (Occasionally when the Delivery Suite is very busy it is necessary to delay Inductions of labour for a few hours until it is safe to continue).

If you go home, you must telephone the hospital if:

- The water discharge changes colour or starts to smell. Inspect your sanitary pad closely: the water should be clear and not offensive in any way.
- Your temperature rises above 37.8 degrees. Check your temperature every 6 hours with the thermometers we have given to you. (Use the chart at the back of this leaflet to record your temperatures).
- If you feel hot, flushed, or unwell in any way.
- If your baby's movement pattern changes in any way.
- If you start to develop any pain/contractions.
- If you start to bleed from the vagina.
- Or if you are worried about anything or have any questions.

GENERAL ADVICE

- Change your sanitary pads frequently- it is important that a good standard of hygiene is maintained after your waters have broken to reduce the risk of infection.
- You may shower and bathe as normal, but do not use baths which use an air jet massage system.
- Do not use talcum powders or feminine hygiene products, these may cause irritation.
- Keep active but try to avoid long journeys.
- Keep yourself hydrated with lots of fluids and eat normally.
- It is advisable not to have sexual intercourse at this time to reduce the risk of ascending infection.
- If you need to return to hospital, bring only your birthing partner with you, your pregnancy notes your suitcase and your baby clothes.
- Please make sure you have arranged some transport to transfer you to hospital. (Ambulances should be used for emergencies only)

DELIVERY SUITE 01922 656283

**PLEASE USE THIS TO RECORD YOUR
TEMPERATURE READINGS.**

DATE	TIME	TEMPERATURE

APPOINTMENT BOOKED FOR

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