What can reduce the need for an induction?

Membrane sweep
This can be done by your LMC at home or in clinic, and is usually offered when you are 40 weeks pregnant. It involves having a vaginal examination where the membranes are gently separated from your cervix. Hormones are then released that may help to prepare your body for labour.

http://www.nhs.uk/video/Pages/what-is-a-sweep.aspx

Is there anything I can try myself?
Most home remedies to start labour are unsuccessful and some are harmful. If you are considering trying a home remedy discuss it first with your LMC.

More Information

- Talk to your LMC
- Access the following resources:
  
  
**Induction of labour**

**What is induction of labour?**

For most women labour starts naturally, but sometimes labour needs to be started medically. The process of starting labour is called induction of labour.

**Why is induction of labour being recommended?**

Induction of labour is recommended if you are well past your due date (over 41 weeks) or if there are concerns about your pregnancy and the doctors feel that it is safer for your baby to be born. Timely induction of labour can reduce the risk of stillbirth for some babies.

**Your options**

Your Lead Maternity Carer (LMC) will explain why induction of labour is being recommended, the risks and benefits of this, and any alternatives available to you if you choose not to be induced.

You will have time to consider your options, have chance to ask questions, and will be supported in whatever decision you make.

**Methods for inducing labour**

**Prostaglandin gel**

The hormone gel is placed next to the cervix and causes it to soften and dilate. It often works slowly and may need to be repeated after 6 hours, and sometimes again the following day. You may feel ‘period type’ pains after the gel has been given. You will need to stay in hospital during this process.

**Breaking the waters**

This involves breaking the membrane sack around the baby with a tiny hook during a vaginal examination. This can only be done if the cervix is dilated enough to allow this to happen.

**Syntocinon drip**

This is a hormone that is given through a drip into a vein and is increased at regular intervals until the contractions become regular and strong. It is only given once the waters have broken. Your baby’s heartbeat and your contractions are monitored continuously.

**Balloon catheter**

This is a small tube that is inserted through your cervix, and a tiny balloon is inflated which presses on the cervix and encourages it to dilate. It stays in for 24 hours or until labour starts. If your pregnancy has no complications you have the option of going home while the balloon is in.

**Risks of Induction of labour**

Induction of labour does have some side effects and risks for you and your baby so it is not something that is recommended without a good reason.

- Induction of labour can take time, sometimes two to three days. Rarely labour can happen very quickly causing a rapid birth.
- There is a chance that the prostaglandin gel can cause the contractions to occur without a rest in between, affecting blood flow to your baby. Both you and your baby will need to be closely monitored.
- The labour pain sometimes builds up more quickly.
- The induction of labour does not always work.
- You have an increased risk of having a caesarean birth.
- You have an increased risk of heavy bleeding following the birth.