

## Labour &amp; Birth: Questions &amp; Answers

	What's happening?	What does it feel like?	What the partner can do?
<b>Prelabour</b>  On & off constant for hours or days	Cervix softens, thins	Mother has some possible very early signs of labour ( <i>vague nagging backache, several soft bowel movements, intermittent or continuous cramps possibly extending into the thighs, unusual burst of energy, increased vaginal discharge, 'show', continuing, non progressing contractions that do not become longer, stronger and closer together over a period of time</i> ) Mother may become anxious or tired if it lasts a long time	Encourage normal activities in the daytime, as long as they are not strenuous. If the contractions start in the evening or during night, take a shower and <b>go to bed – it is ok to take Graval 100mg</b> Distracting activities are appropriate Mother should eat whenever she feels like it Be patient; do not get over excited or preoccupied with contractions Mother can bathe or shower* to relax *(do not have a bath if your waters have gone)
<b>Early labour (1<sup>st</sup> stage)</b>  Lasts a few to 20 hours	Cervix thins & dilates to 3 or 4 cms Contraction every 5-20 mins, last 30-40 sec, may be mildly painful Cervix may also need to soften and move forward Longest part of labour May have 'show' Membranes may rupture	May feel a heaviness in lower and abdomen like the beginning of a period Contractions start in the back and move to the front Restless Excited, anxious May feel nauseated & vomit	Continue as in prelabour Go for a walk Frequent fluids (see Labour aide recipe below) Light meals, easily digested Empty bladder every 1-2 hrs Have baths/ shower Music Slow relaxation breathing when mother cannot walk or talk through contractions
<b>Active labour (1<sup>st</sup> stage)</b>  Lasts ½ to 6 hours approx	Cervix thins completely Continues dilation to 8 cms Rhythmic contractions last about 60 sec's and occur every 3-5 mins Faster progress Baby moves down in the pelvis	- Contractions are longer, stronger and close together, They are much more intense - you cannot talk or walk during contractions - increasing pain keeps you focused on working with your body. You become quiet and focused on the labour - need to stay relaxed and keep breathing softly regardless of the pattern of breathing being used or the intensity of contractions	<b>Now, its time to call the midwife!</b> Continue as above <u>In addition:</u> She will require your total, undivided attention Match her quiet, serious, focused mood Use comfort measures. For backache use cold or heat, counter pressure, massage position changes Remember to offer fluids after every contraction Remind her to urinate every 1-2 hours
<b>Hard labour or transition (1<sup>st</sup> stage)</b>	Last stage of labour Dilation is completed Contractions every 1-2 mins lasting 60-90 secs Shortest stage Body working very hard & efficiently Baby may begin descent giving pressure on rectum	Most intense part of labour Completely focused, using all resources to work with contraction, nothing else matters Hearing acute Intensity may be overwhelming May express feelings of fear, panic, anger, despair May feel sick, vomit, tremble, belch, hiccup, hyperventilate, grunt, urge to push	Know this is the shortest & most intense part of labour Complete concentration with each contraction Support of these around you Focal point Remember the baby <u>Use comfort measures:</u> Change position between the contractions Shower/bath Use your voice (low & deep)
<b>Birth (2<sup>nd</sup> stage)</b>  Lasts 15 mins to 3 hours	Contractions push the baby out of the uterus, down the vagina Uterus does 80% of the work Mother follows her natural urge to push using abdominal muscles Baby's head turns to find the best fit through the pelvis and under the pelvic bone Perineum stretches Contractions every 3-5 mins lasting approx 60 sec	Some women experience a rest period before pushing starts Urge to push builds in intensity until uncontrollable. May occur intermittently during a contraction Working very hard Feel very hot/flushed but feet cold May feel more motivated / energized More aware of surroundings More rectal pressure Crowning of baby's head causes a stretching, tingling & burning sensation Tremendous relief with birth of head	Help her to relax between contractions & encourage her to push when she feels the urge Cool cloth on face and neck Hair off the face and neck Warm socks on feet Help to change positions Remind her of the baby  Don't rush – the midwife will remind her to stop pushing and breathe her baby out or pant to stop pushing Help her to tune in to midwife's instructions
<b>Delivery of Placenta (3<sup>rd</sup> stage)</b>  Lasts 5 to 60 mins	The uterus contracts to release the placenta	Mother may feel shaky May feel the uterus contracting Relief as soft placenta is delivered Birth of the placenta is often hardly noticed	Enjoy baby You may want to cut the cord You may want to hold baby if mother is not ready or has pain still from contractions or needs stitches

**Note: When the waters break – you do not need to call the midwife unless:**

1. It is daytime
2. The midwife has instructed you to do so (e.g., if you are Group B Strep positive)
3. The fluid is dark green in colour
4. Contractions intensify quickly
5. You are less than 37 weeks pregnant