

Labor Induction: What You Need To Know

Induction of Labor

Induction of labor means starting contractions when they haven't started on their own.

Induction of labor may require the use of medicines to get your cervix ready or soft. This is called cervical ripening. A small balloon like device may be used to open your cervix.

Your doctor may also suggest breaking the bag of water, giving medicine (oxytocin) in an IV (intravenous) line, or placing medicines (gel or tablets) in or near your cervix to get contractions started.

Types of Labor Induction

There are two types of labor induction:

- **medically indicated labor induction**
This is when your health care provider recommends that labor be started for your health or for the health of your baby.
- **elective labor induction**
This is when labor is started for a non-medical reason (such as for convenience or preference). Elective labor induction is not encouraged.

Call your insurance provider before talking about an elective labor induction to find out exactly what is and isn't covered under your plan.

Elective Labor Induction

Some women request to have labor induced before going into natural labor. You may simply be eager to have your baby during the last weeks of pregnancy.

However, elective labor induction is not always good for you or your baby. There are potential risks to you and your baby when inducing labor.

When labor is induced, it may take a long time for the cervix to open up or labor to really get started. Once the bag of waters breaks, there is a higher chance of infection if there is a longer period of time between when the water breaks and when you give birth.

When labor is induced, your contractions and your baby's heartbeat will need to be monitored with an electronic fetal monitor. This can limit how much you are able to get up and move around in labor.

Using oxytocin to induce labor may cause stronger and more painful contractions earlier in labor than if labor started on its own.

When Labor is Electively Induced and the Cervix is Not Ready

You are more likely to have a longer labor. In a first-time pregnancy, labor can last about 9 hours when the cervix is ready. If the cervix is not ready, labor can last much longer. A longer labor and delivery can cause increased risks for you and your baby.

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You are 3 to 4 times more likely to need an unplanned Cesarean birth. This increases the risk of serious problems for you and your baby with your current pregnancy and any future deliveries.

What You Must Have for Induction of Labor

- Your cervix must be soft and ready to open (dilate). Your health care provider will know this by checking your cervix and assigning a score of cervical readiness.
- Your health care provider must know if you have a history of a Cesarean birth or major surgery on your uterus.

If your health care provider does not think an elective labor induction is right for you, do not be disappointed. The decision to allow your baby to come naturally is the best for both you and your baby.

Your Due Date

When you became pregnant, your health care provider gave you an estimated due date for your baby. This is the date that your baby is expected to be full-term (40 weeks).

Your due date is based on:

- information about your last menstrual period
- results from lab tests
- the age of your baby based on early ultrasound results.

Before Inducing Labor

Your health care provider must be certain of your due date. This will help prevent starting labor before your baby is fully developed.

Problems That Can Occur When Labor is Electively Induced Before 39 Weeks of Pregnancy

Babies born before 39 weeks may have more health problems at birth and later in life than babies born full-term because important brain and body growth happens in the last 5 to 6 weeks of pregnancy.

- Your baby is 2 to 3 times more likely to be admitted to the intensive care unit. This will mean a longer and more difficult hospital stay for your baby. It may also make it harder for your baby to feed and for the two of you to bond.
- You and your baby may need to be separated after birth if he or she needs additional care. Your baby may need to stay in the hospital for a period of time after you go home.
- Your baby may have trouble breathing. He or she may need extra oxygen or a breathing machine (ventilator) to help him or her breathe.
- Your baby may have trouble maintaining a normal body temperature. He or she may need to spend time in a warming area (incubator) to keep his or her body temperature stable.

Please talk with a member of your health care team if you have any questions about your pregnancy or labor.