

Preterm Labor

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Preterm labor is labor that starts before 37 completed weeks of pregnancy. Your baby can have serious health problems if born too early.

Delivery can sometimes be prevented or delayed, giving your baby more time to grow. It can be difficult to tell the differences between true and preterm labor. Your health care provider can tell if you have preterm labor by giving you an exam and finding changes in your cervix.

Warning Signs of Preterm Labor

Warning signs of preterm labor include:

- change or increase in vaginal discharge
- bleeding from your vagina
- a sudden gush or leak of fluid from your vagina
- a regular pattern of 6 or more contractions in 1 hour
- menstrual-like cramps for more than 1 hour
- tightening of the abdomen
- increased pelvic pressure for more than 1 hour
- intestinal cramping with or without diarrhea or indigestion for more than 1 hour
- throbbing in the vagina, cramps in the thighs, or feeling your baby is pushing down
- a feeling that things are not right.

How Contractions Work and Feel

Your uterus is shaped like a pear, sitting upside down in your pelvis. The “stem end” is called the cervix, which is the neck, or opening, at the bottom of your uterus.

The wall of your uterus is a muscle. When this muscle contracts, it becomes hard and tight just as any other muscle in your body would. When the contraction stops, your uterus becomes soft again.

Contractions can feel like a tightening sensation, like menstrual cramps, a dull backache or pain on the front of the thighs.

It is normal for your uterus to contract at times during your pregnancy. Your uterus is contracting too much if you feel 6 or more contractions an hour.

How to check for contractions

To check for contractions, lie on your left side. Put your fingertips on your abdomen (just above your belly button). If you feel your abdomen tighten (become hard) and shorten (become soft), you are having contractions.

Count the time between contractions from the start of one tightening to the start of another tightening. (Some contractions may be stronger than others.)

(over)

What to Do if You Think You're Having Contractions

If you think your water has broken, or if you are having heavy bleeding, call your health care provider right away.

If you are having cramps or pain:

- Drink 2 to 3 glasses of water or juice.
- Empty your bladder (urinate).
- Lie down on your left side and rest.

Recheck your symptoms. If you still have signs of labor, call your health care provider.

Tests for Preterm Labor

At the hospital, your health care provider may want to do some or all of the following tests:

- fetal monitor to check for contractions
- pelvic exam and cervix check
- lab tests for infection, tests to tell if you are at risk for delivering early, or both.

Treatment for Preterm Labor

There are many ways to treat preterm labor. They include:

- fluids by mouth, intravenous (IV) line or both
- medicine to stop contractions
- medicine to treat infections
- bed rest. Lying down (instead of sitting or standing) can relieve pressure on your cervix. Avoid lying flat on your back. Lying on your side is better for blood flow to your baby.

Many times, preterm labor can be treated at home. Other times, a hospital stay is needed. Your health care provider will help determine which is right for you.

General Instructions to Help Prevent Preterm Labor

If you are at risk for preterm labor:

- Empty your bladder often.
- Drink lots of liquids, especially water. Drink enough to keep your urine pale yellow in color.
- Eat foods high in fiber.
- Eat a well-balanced diet.
- Do not smoke, use alcohol or drugs.
- Avoid strenuous activities like jogging, aerobics or lots of stair climbing.
- Do not lift small children, heavy laundry, groceries, boxes, or objects at work.
- Avoid heavy cleaning such as scrubbing floors, moving furniture or vacuuming.
- Do not do yard work.
- Avoid car trips longer than 30 minutes, and do not fly.
- Avoid breast or nipple stimulation or sex.

Your health care provider will tell you if you have any activity restrictions.