



Information for
patients and
carers

Induction of labour and membrane
sweep

What is induction of labour?

Induction of labour is a process designed to start labour artificially. Most women will go into labour spontaneously by 42 weeks, but about one woman in five will have her labour induced.

Why might induction of labour be offered?

- If your baby's growth and well-being is thought to be at risk because of evidence from heart rate tracings or scans
- If you have a condition such as high blood pressure or diabetes that may threaten both your own and your baby's health
- If your pregnancy is continuing beyond 41 weeks. After 42 weeks the placenta can become less efficient and your baby may experience a reduced oxygen supply. In severe cases this can result in a baby's death at, or around, the time of birth.

Your midwife or doctor will only recommend induction if they feel it will benefit your health or that of your baby. They should fully discuss their recommendation and any other options with you.

Membrane Sweep

Whenever possible a membrane sweep would be offered to you as the first part of the induction process. This procedure is often successful in stimulating labour contractions in the following couple of days and may therefore avoid need to use drugs to start your labour.

A membrane sweep involves your midwife or doctor placing a finger just inside your cervix (neck of the womb) and making a sweeping circular movement to separate the membranes surrounding your baby from the cervix. It can be carried out at home or during an antenatal clinic check. You may find it a little uncomfortable, but there is no risk to your baby. It is not uncommon to experience a pinkish vaginal loss or 'show', but any

fresh bleeding should be reported to Sharoe Green Unit, maternity triage on 01772 524495.

If this is to be your first birth, you will be offered a membrane sweep once you are 40 weeks pregnant.

For women who have given birth before, a membrane sweep will be offered at 41 weeks.

Additional membrane sweeps may be offered if needed.

If labour has not started by the time your baby is 10 to 12 days overdue you will generally be admitted to hospital so that other induction methods can be used.

What if I choose not to have my labour induced?

Your health and that of your baby will continue to be closely monitored. For example, if you choose to let your pregnancy continue after 42 weeks you will be offered ultrasound scans to assess the amount of fluid ('water') surrounding your baby and twice weekly appointments at the maternity day unit for electronic monitoring of your baby's heart beat. These assessments provide a means of checking how well the placenta (afterbirth) is continuing to nourish your baby.

You can change your mind and opt to have your labour induced at any stage.

Further information

Please refer to either the in-patient or out-patient induction of labour information leaflet, depending on which is relevant to your circumstances.

Contact details

Should you require further advice or information please contact:
Maternity ward, Sharoe Green Unit on **01772 524320/524338**.
Maternity day unit, Sharoe Green Unit on **01772 524776**

Sources of further information

www.lancsteachinghospitals.nhs.uk

www.nice.org.uk

www.nhs.uk

www.patient.co.uk

www.accessable.co.uk

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Please ask if you would like help in understanding this information. This information can be made available in large print and in other languages.

Cantonese:

如果你希望以另外一種格式接收該資訊，請和我們聯絡，不必猶豫。

Gujarati:

જો તમને આ માહિતી બીજી રચના કે ફોર્મેટમાં મેળવવાની ઈચ્છા હોય, તો કૃપા કરી અમારો સંપર્ક કરતા અચકાશો નહિ.

Hungarian:

Kérjük, vegye fel velünk a kapcsolatot, ha más formában kéri ezt az információt.

Polish:

Jeżeli chciał(a)by Pan/Pani otrzymać niniejsze informacje w innym formacie, prosimy o kontakt.

Punjabi:

ਜੇ ਤੁਸੀਂ ਕਿਸੇ ਹੋਰ ਫਾਰਮੈਟ ਵਿਚ ਇਹ ਜਾਣਕਾਰੀ ਲੈਣਾ ਚਾਹੁੰਦੇ ਹੋ ਤਾਂ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰਨ ਤੋਂ ਨਾ ਝਿਜਕੋ।

Urdu:

اگر آپ اس معلومات کو کسی اور صورت میں حاصل کرنا چاہتے ہیں تو برائے مہربانی ہم سے رابطہ کرنے میں ہچکچاہٹ محسوس نہ کریں۔

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