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## *Labour and Delivery*

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Labour begins when the cervix opens or dilates. The uterus contracts and the abdomen becomes hard at regular intervals.

False labour (Braxton-Hicks) contractions may be confused with true labour. Braxton-Hicks contractions are usually irregular, occur in afternoon or evening when you are tired, and often go away after you lay down.

### **Go to the Umhlanga Hospital Labour Ward immediately:**

- If you feel you have a medical emergency pertaining to your pregnancy.
- If you are over 36 weeks and are having strong contractions every 5 minutes for more than 2 hours.
- If you are less than 36 weeks and are having strong contractions more than 4 times in an hour.
- If you think you have broken your water. You may notice a large “gush” of fluid or continued leaking of fluid.
- You are concerned with decreased fetal movement.
- If you have any concerns, rather be safe and go to the labour ward, who will assess you, attach the CTG machine and contact Dr Berios.

### **What to expect at Delivery Time?**

- Once you arrive at the hospital you will be guided to the Labour Ward where a nurse will examine you and contact Dr Berios.
- Dr Berios will come to examine you every few hours during labour.
- Though we try very hard to avoid caesarean deliveries, emergencies can occur during labour that we cannot anticipate.

### **The most common reasons for unplanned caesarean section are:**

- Your baby is in distress.
- Your cervix has stopped dilating despite all possible interventions.
- You have been pushing for several hours and the baby is not descending.
- You have a medical condition which makes it unsafe for a vaginal delivery.
- Your baby is not head down (in vertex position).

### **Pain Medication Options**

As labour progresses – and contractions become stronger and more frequent – some women choose medication.

Options include:

- A regional pain blocking procedure that can use be used during labour (epidural block).
- An inhalation analgesia that can be used during labour, such as nitrous oxide.
- Opioids e.g., Pethidine

## **Warning Signs of Pre-Term Labour (labor that begins before 37 weeks):**

- Uterine Contractions Four (4) or more per hour – may be painless
- Menstrual-like Cramps Felt low in the abdomen- may be constant or may come and go
- Lower, Dull Backache - Lower back pain that radiates to the sides or the front not relieved by change of position
- Pelvic Pressure
- It may feel as though the baby is going to “fall out”
- Stomach Cramps
- You may have the feeling of “gas pains” with or without diarrhea
- Increase or Change in Vaginal Discharge, may become pink or brown-tinged, mucous, or watery
- A general feeling that something is Not Right
- You may just not feel well, even without a specific cause. Consult us immediately if you are experiencing any of these symptoms.