

1. Let Labor Begin On Its Own

For many women, the last days and weeks of pregnancy can be very uncomfortable and emotionally difficult. We are anxious to meet our babies and hold them in our arms. Aches and pains may become more bothersome. Sometimes, minor problems or worries arise, and mothers may feel pressure to induce their labor—even when it would be safe to wait.

It's important to remember that induction is forcing labor to begin before the baby and mother's body are ready. Going against the natural process is not always easy and often takes more than a day. Sometimes, it doesn't work at all, and the baby is delivered by cesarean surgery before labor even gets started.



When labor begins on its own, you can be sure your baby and body are ready for birth.

Why letting labor begin on its own is almost always easier and safer

- Medications used for induction can make contractions stronger, longer, and more frequent than natural contractions, worsening the mother's pain and fatigue
- The stronger and longer squeezes of induced labor can cause distress to the baby, and this can often be seen in worrisome heart-rate changes
- Induced labor usually requires an intravenous line (IV) and continuous electronic fetal monitoring, which make it harder for the laboring woman to move and change positions to find comfort and help labor progress (see pages 6-7)

- When labor starts naturally, you can begin with the confidence that the baby is ready to be born and your body is working just right

RESEARCH insights

There is growing evidence that induced labor holds risks for mothers and babies. In 2007, researchers reviewed the entire body of literature on the risks of induction in healthy women with normal pregnancies and found that when labor is induced, some problems may be more common.

Induction increases the risk of the following occurring:

- A vacuum- or forceps-assisted vaginal birth
- The need for epidurals or other drugs for pain relief
- Cesarean surgery
- Babies born with low birth weight
- Admission of babies to the neonatal intensive care unit
- Longer hospital stays

When Labor Induction Is Necessary ... and When It Is Not

Sometimes, a medical condition or complication makes labor induction necessary. In these cases, induced labor may be the safest choice for the baby, the mother, or both, despite its risks. The American College of Obstetricians and Gynecologists (ACOG) has identified six of those situations.

When induction may be safer than waiting for labor to start on its own

- Your water has broken and labor has not begun within 12-24 hours
- Your pregnancy is post-term (more than 42 weeks)
- You have high blood pressure caused by your pregnancy

- You have health problems, such as diabetes, that could affect your baby
- You have an infection in your uterus
- Your baby is growing too slowly

However, induction is sometimes recommended when it is neither necessary nor safer for the mother or the baby.

When induction is not necessary

- You and your baby are healthy but your baby is thought to be getting too big
- Your amniotic fluid is low, but you and your baby are otherwise healthy
- You want to get your pregnancy over with or give birth on a specific day (“elective induction”)

If your care provider suggests induction for one of these reasons, ask the questions in the "Talk it over" box to learn more about your options.



Having a baby that appears to be “too big” is not a valid reason to induce labor.

take NOTE

Your Due Date

An estimated due date is just that, an estimate. It is safe and healthy to give birth as many as three weeks before or two weeks after your due date. First-time mothers, on average, give birth an entire week after their due dates.

In the last days and weeks of pregnancy, babies are preparing their lungs to breathe air and their gastro-intestinal systems to digest breastmilk.

If you have passed your estimated due date, take comfort in knowing that your baby is making her final preparations for life outside your womb, and rest assured that your labor will begin very soon.

TALK it over

Questions To Ask If Your Care Provider Recommends Induction of Labor

- Why are you recommending induction of labor?
- What are the risks to my baby and me if I wait for labor to begin naturally?
- Do research studies confirm that inducing labor in this situation is safe and will reduce my risk of an unhealthy outcome?
- Can we try more natural methods of induction before using drugs?
- Is induction likely to be successful for me?
- Is my cervix ripe? (Your provider can tell you if your cervix is ripe. Women who are induced before their cervix is ripe are much more likely to have cesareans, even if cervical ripening drugs are used.)



Print PDF: If You Have Been Induced

Learn tips on how to keep birth as safe and healthy as possible when induction is necessary

www.mothersadvocate.org