

## **LABOR AND BIRTH BASICS**

### **What is labor?**

Labor is the process by which your cervix (found at the end of your vagina and closed until the end of pregnancy) progressively softens, thins, and opens to allow your baby to be born.

### **How will I know I'm in labor?**

Towards the end of pregnancy, you will notice some changes. You may have lots of painless, or mildly uncomfortable "tuning up" contractions. You may notice increased mucous discharge. Your baby will probably settle with his or her head deeper in the pelvis in the final weeks of pregnancy. Some women experience an energy spurt.

As you move towards labor actually beginning, it is not uncommon for the Braxton-Hicks or "tuning up" contractions to become more and more frequent. They may even settle into a regular pattern at times, or be strong enough to keep you awake. Labor is becoming active (meaning contractions are progressively thinning and opening your cervix) when the contractions become longer and stronger, getting to where they require your full attention, last 60 seconds or more, are regularly five minutes or less apart (from the beginning of one contraction to the beginning of the next). Generally speaking, you can be pretty certain that this is the real thing if you can no longer walk or talk during the contractions. Contractions may be accompanied by leaking fluid, bloody mucous, increased pressure, and backache.

### **How long does labor take?**

Labor varies in length from person to person. An average first labor is usually around 12 to 14 hours from the time your cervix begins changing and contractions become strong enough to work consistently. Many women have hours to days of somewhat uncomfortable contractions that come and go but are not dilating the cervix yet. This is not harmful but it is important that you rest and eat so that you do not become exhausted. Please ask for help if you are so uncomfortable that you cannot rest during this time, and please do not become discouraged. This is a normal occurrence and does not mean anything is wrong.

Second to subsequent labors average 6 to 8 hours. Again, there is lots of variation. Also, if this is a third or subsequent baby, you will probably find that your Braxton-Hicks contractions are much stronger and that you feel them earlier. Again please call if you have any concerns.

The pushing phase of labor can take a few minutes to a few hours. It generally goes much faster for women who have had babies before.

### **When should I call the midwife?**

Please feel free to call anytime you think something is happening. We will come to be with you whenever you feel you need us. It is nice to have early warning so that we can plan our day, make arrangements, and so on.

## **How do I cope?**

### **PRELABOR**

When you are having lots of uncomfortable contractions but not yet changing your cervix, you can get discouraged or frightened. The key here is to stay relaxed and accept that things will happen at their own pace. Sleep if you are tired. Soak in a warm tub. Take walks. Plan and engage in activities which divert your attention and take your mind off the contractions. Have your partner give you a massage. Be sure to stay well fed and well hydrated.

## **EARLY LABOR**

During this time, contractions are coming regularly, you may be leaking some fluid, but it is early and your cervix may be just thinning out, coming forward, and dilating up to 3 or 4 centimeters. Labor may be uncomfortable but is relatively mild and easy to deal with if you are not exhausted. The same measures that work for prelabor are useful for early labor. In addition, if you are rested, going for a walk may stimulate your labor and get it moving a bit faster. Please call if you feel uncertain about what is happening or what to do. Otherwise, aside from basic comfort, rest, hydration, and nutrition, try to ignore this part of labor as long as possible as it tends to be the longest part. Be careful about whom you tell you are in labor- people tend to get over-excited and then may be calling you frequently over the next few days to get progress reports. Unfortunately, if things move along slowly, this can set you up for frequent interruptions, annoyance, and worst of all, can create unnecessary anxiety about your "lack of progress" which in reality may be perfectly normal.

- When women are able to freely walk, move, get in the shower or tub, change positions at will rather than lying in bed attached to a continuous fetal monitor, they are more comfortable.
- Staying well-rested and well-fed increases tolerance to pain. Being hungry and exhausted makes pain worse.
- Maintaining a calm, friendly atmosphere increases relaxation and makes it easier to deal with pain. Being surrounded by strange people, unfamiliar sights and sounds, or being with someone who is frightened of the birth makes it hard to relax and makes pain hurt worse.
- Having others treat you as if you are ill, or tell you how bad labor is creates anxiety and makes it hard to relax while having people who are calm, cheerful and confident of your ability to give birth makes it easier to tolerate pain.
- Being in an environment where birth is treated as a pathology creates tension and more pain. Being in a environment that treats birth as a normal event makes it easier to cope with the task at hand and helps you feel more confident of your ability to cope.

## **ACTIVE OR WORKING LABOR**

Working labor begins when contractions are progressively becoming longer, stronger, closer together, require all of your attention to cope regardless of what you do, and are causing progressive cervical changes. Because some women enter labor at 3 or 4 centimeters dilated, be cautious of interpreting a specific amount of dilation as automatic proof of labor. It is the changing of the cervix that is important, and women have been known to walk around 4 centimeters dilated for a week or more before going into active labor. However, if you are this far dilated, take heart as a great deal of work is already done for you!

Working labor generally requires the use of specific coping techniques such as slow, controlled breathing, focused relaxation (consciously keeping your body loose and relaxed), position changes, having someone breathe with you, use of the tub or shower, massage and any other tool the helps. Contractions get stronger as you progress-- this is a good sign! But it means that you may need to use more and more tools to manage the intensity and stay comfortable as possible.

## **TOWARDS THE END OF THE FIRST STAGE OR DILATING PART OF LABOR, YOU MAY EXPERIENCE TRANSITIONAL LABOR**

This is a short time (usually no more than a few minute to a few hours) of very strong, long contractions which may be back to back, even. You may have intense backache, find yourself nauseated, belching, shivering or trembling. It is not unusual at all to feel panicky and frightened but it is soon over. During this time, you need people to be with you and use whatever helps such as massage, breathing techniques, position changes, counter pressure, tub bathing and so on. It is not uncommon to feel as if you cannot go on at this time, to feel like nothing is working, or to feel apprehensive.

## **PUSHING PHASE**

As your cervix becomes completely open, you will feel more pressure and perhaps a sensation similar to needing to have a bowel movement. This urge may be involuntary. When you feel an overwhelming urge to push, you may follow that

feeling. As your body shifts gears into pushing, you will probably feel better, your contractions may come less frequently, and you may even regain your sense of humor.

There is no one right way to push. We think it is useful to use your body as a guide but will coach your pushing if needed to help you be more effective. You may use any position that is comfortable and helps get the baby down. Positions such as squatting, standing, and kneeling help you take advantage of gravity and squatting makes more room in the pelvis. You may even push on the toilet if this is comfortable as long as you let us be with you to monitor your progress.

Once the baby's head is showing, you may feel a constant urge to push, or you may feel frightened because there is a great deal of burning and stinging. Warm compresses are helpful at this stage. As long as the baby is doing okay, it is fine to stop and pant when the stinging is very severe and allow yourself more stretching time. Eventually the baby's head will no longer retreat between contractions and the birth will be imminent. You may reach down and touch your baby's head. We may ask you either to give a slow steady push, pant, or give small grunts depending on the speed with which the birth is being accomplished.

Once the head is out, you need to stop pushing when we tell you so that we can check for the cord and suction the baby if need be. The baby will rotate and you can then push the shoulders out. The rest of the body usually follows quickly. If there is time, we will have you reach down if you want and help catch the rest of the baby as it is born. The baby will go on top of your belly where it will be dried off, covered with blankets and have a cap put on. We will be observing to make sure that the baby is breathing and doing okay. The baby may look purplish at first and then turn pink. The baby may not cry much, especially when handled gently. If the baby is clearly breathing and pink there is no reason to encourage crying.

## **ENJOY THIS TIME**

You may feel cold or shaky and can be covered with warm blankets. The placenta usually is born in the next 5 minutes to half hour. It is soft and can be pushed out easily once it detaches.

You will be checked to make sure your uterus is contracted and that you are not bleeding too much after the birth. This is important. If you are bleeding too much, you will be given medicine to stop the bleeding. You may feel nothing to severe cramping after the birth depending on the number of babies you have had. If all is well with the baby, he or she may remain on you until you are ready to let someone else hold the baby. The cord will be clamped and cut when it turns white and isn't pulsating unless there was a need to cut it earlier.

## **AFTER THE PLACENTA IS BORN**

You are not bleeding too much and have had a chance to be with your baby, you will be checked for tears, cleaned up and helped to get comfortable. If your baby is interested in breastfeeding, you can do it as soon as possible. When you have had a chance to enjoy your baby and get comfortable, we will measure, weigh, and examine the baby.

## **IN CLOSING**

We hope you have found this handout helpful. There is no way that it can replace reading, talking, or taking prenatal classes. However, we hope it will serve as a starting place or a review in understanding the process of labor.

Birth is a powerful time in the life of women and families. Even when we are old and frail, we remember the births of our babies with tremendous clarity. It is our wish that your birth will be a positive experience for you, that you are able to make choices and have support that enables you to greet your child with joy and remember the event with warmth and without regrets.

Please let us know how we can best facilitate this for you.