Onset of labour/when to go to hospital

Onset of labour maybe seen by one or more of the following: I have grouped them by course of action:

Stay at home

(but start to get excited, do what you can to get oxytocin going if you are ready)

- Nesting (often several days/weeks before)
- Show (jelly/mucus from the cervix comes out) (often several days/weeks before)
- Diarrhoea/nausea
- Backache (particularly that comes and goes)
- Contractions every 8+ minutes lasting up to about 45 seconds

Call hospital/midwife/doctor

(to let them know you will be coming in later on, to seek reassurance and ask any advice)

- Contractions 6+ minutes lasting 45 seconds
- Waters break (be ready to go to hospital within the hour)

Go to hospital

(or you may call and then go)

- When mother feels it is time to go
- Waters break (see above)
- Contractions every 5 minutes, lasting 60 seconds

Please note: contractions do not necessarily start at 10 minutes apart and get evenly and progressively longer and closer together — they may start at six minutes apart, or three minutes, or only ever be four minutes apart but very long. Therefore trust your gut instinct as to whether they are getting stronger and longer and more frequent, and go to hospital when you feel ready.

Remember however the average first labour is 18 hours long, and you will probably be more relaxed and comfortable (and therefore progress better) at home for the first part.



You should also see a doctor urgently if you have any of the following:

Pre-eclampsia:

Visual disturbance, marked welling of hands or feet or face, pain in side (epigastric), dizziness, sever headaches, nausea, increased blood pressure and protein in urine. Severe pre-eclampsia affects about 2% of pregnant women. For more information see http://www.apec.org.uk/

Obstetric choleastasis:

This is a liver disorder and causes severe itching, particularly on feet and hands.

For more information see http://www.ocsupport.org.uk/

Placental abruption:

This is where the placenta starts to detach from the uterine wall, and will be seen by a flow of fresh blood

