



Your Guide to Labour and Birth

*best start
meilleur départ*

by/par health **nexus** santé



**Labour is different
for each woman.
It is normal to feel
excited, happy,
sad, nervous, and
afraid all at once!**

In this handout, you will learn the answers to common questions women have about labour and birth:

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1. What needs to be done to get ready?

- Learn about the process of labour and birth.
- Think about comfort measures you want to try as you move through the stages of labour.
- Talk about comfort measures with your support person and health care provider.
- Learn about breastfeeding.
- Learn about services and community programs in your area that help parents (drops-ins, breastfeeding support, dads' groups, food banks, community closets, etc.).
- Ask what the hospital or birth centre will provide and what you need to bring with you. Pack a small suitcase or bag 3 to 4 weeks before your due date (see next page).



What to Pack Before Going to the Hospital/Birthing Centre

For You

- Health card
- Pen and paper
- Underwear
- Nursing bra or good support bra
- Toiletries (toothbrush, hairbrush, lip balm, hairdryer etc.)
- Sanitary pads
- Nightgown, slippers and robe
- Loose fitting clothes for the trip home
- Plastic hospital registration card, if you have one

- Money for vending machines, hospital cafeteria or hospital parking
- Phone numbers for friends and family
- Camera
- Cell phone and charger
- Very light reading
- Your favorite music

For Your Baby's Trip Home

- Approved car seat
- Undershirt
- Diapers and wipes
- Sleeper
- Socks or booties

- Hat
- Sweater
- Thin blanket
- Warm blanket
(for winter)

For your partner or support person

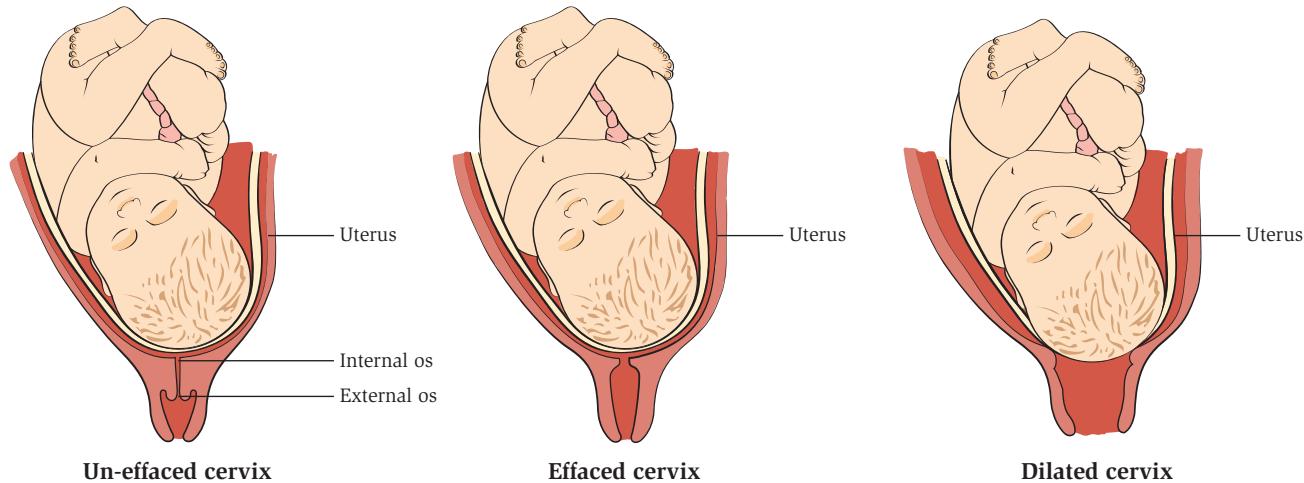
- Pajamas or comfortable clothes
- Toiletries
- Money
- Cell phone and charger
- Book and music



2. What is labour?

Labour is the work your uterus does to help the baby come out. For many hours, your uterus will tighten (contract), rest, and then tighten (contract) again. This makes the opening of the uterus (cervix) get thinner (efface) and open (dilate).

The Thinning and Opening of the Cervix



Efface

Your cervix gets thinner (effaces) before it opens (dilates).

Dilate

Your cervix will open (dilate) to about 10 cm (4 inches) before your baby comes out.

A contraction occurs when the uterus gets tight, rests, and then gets tight again. You will feel many contractions when you are in labour. The “pain of childbirth” comes mainly from the contractions. When your cervix opens to 10 cm, your contractions and your pushing will move the baby down the birth canal (vagina) and out into the world.

Labour and birth is a natural and important process for your body. Your hormones are preparing your body and your baby for the transition from the womb to the outside world. Trust the process.

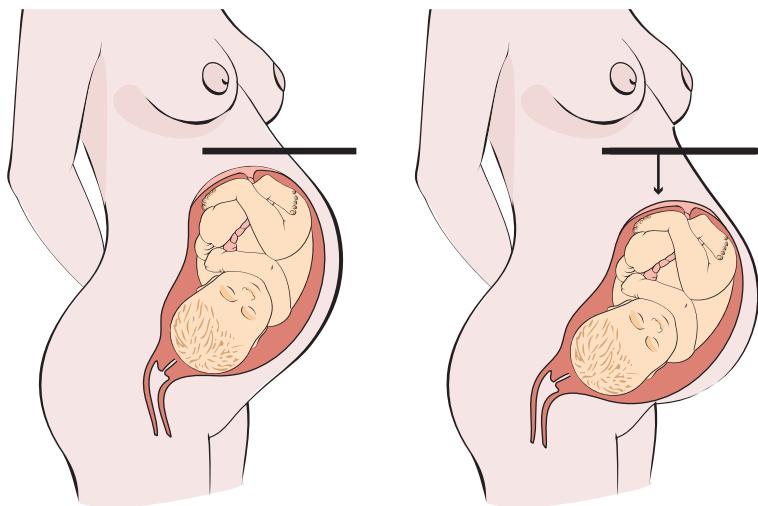
For more information, see *Pathway to a Healthy Birth* at www.nationalpartnership.org/research-library/maternal-health/pathway-to-a-healthy-birth-booklet.pdf

3. What are the signs of labour?

There are some normal signs that tell you that your labour may begin soon. Most women go into labour within a week of their due date. If you have signs of labour before you are 37 weeks pregnant, go to the hospital or birthing centre right away.

(1) Lightening

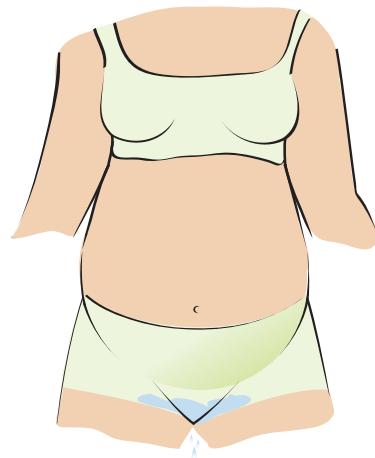
Near the end of your pregnancy, your baby will move down. When this happens you will be able to breathe better. You will feel less burning in your chest and throat after you eat. You will have to pass urine more often. If this is your first baby, this may happen 2 to 3 weeks before you go into labour. If this is not your first baby, this may not happen until closer to the time you will give birth.



Baby drops lower
near the end of
pregnancy.

(2) Mucous Plug

While you are pregnant, you have a thick mucous plug in your cervix. As the baby's birth gets closer, your cervix begins to thin and open, and the plug may come out. If this happens you will notice thick mucous on your underwear, or in the toilet, or you may not notice it at all.



(3) Bloody Show

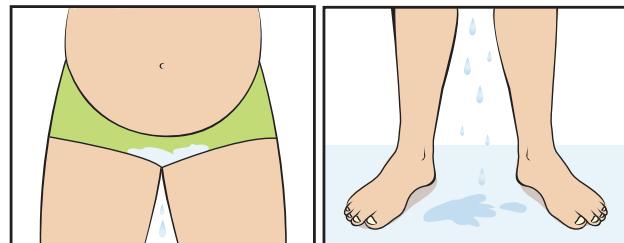
You may notice a pink, red, or brown discharge a few days before labour or during labour. This is called bloody show. It is a sign of your cervix changing shape and the mucous plug coming out. Tell your health care provider when this happens.

(4) Bag of Water Breaks

Your baby is inside a bag of water (amniotic sac) in your uterus. When the baby is ready to be born it is normal for the bag of water to break. This may happen before labour starts, early in labour or when the baby is almost ready to be born. When it happens, you may have a little or a lot of water leaking from your vagina. Sometimes women do not know whether this is water from their uterus or urine. If you are not sure, call your health care provider.

When your bag of water breaks:

- Write down the time that your bag of water broke.
- Look at the colour of the water (it should be clear).
- Notice if there is a smell (it should not smell).
- Do not use a tampon – use a pad in your underwear or towel if needed.
- Call your health care provider or hospital for instructions.



(5) Contractions

Late in your pregnancy you may have contractions (uterus tightens, rests, and tightens again) that are very strong. They may come and go for hours or days and then stop.

These contractions are helping your womb (uterus) get ready for birth and are called **pre-labour** or Braxton-Hicks contractions. The chart below will help you know when you are really in labour.



Pre-labour contractions	True labour contractions
<p>Do not get stronger.</p> <p>Do not become regular.</p> <p>Go away with walking.</p> <p>Feel strongest in front.</p> <p>There is no bloody show.</p> <p>Tend to go away with rest.</p>	<p>Get stronger.</p> <p>Become regular and closer together.</p> <p>Get stronger when you walk.</p> <p>May begin in back and move to front.</p> <p>Bloody show is usually present.</p>

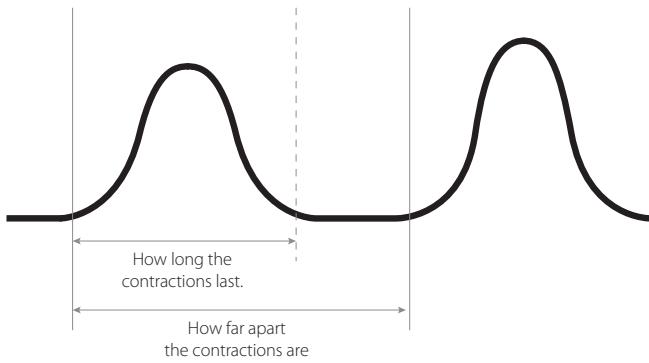
4. How do you time your contractions?

By learning how to time your contractions, you will know when you are in true labour. Time your contractions when the contractions come closer together and/or the contractions get stronger or when your water breaks.

It is also helpful to time for at least 3 contractions in a row to see what the pattern is.

Write down:

- When each contraction begins and ends.
- How far apart the contractions are.
- How long each contraction lasts.
- How strong the contractions feel.



Use a clock or watch with a second hand. To find out how long the contraction lasts, start timing from the beginning of the contraction to the end of the same contraction.

To find out how far apart contractions are, time the beginning of one contraction to the beginning of the NEXT contraction.

Labour Record

Start Time	Stop Time	Length of Contraction	Frequency of Contractions

5. When should you go to your place of birth?

- If you are bleeding from your vagina.
- When your contractions are 5 minutes apart and are also increasing in intensity (your health care provider may ask you to go to the hospital earlier).
- When your water breaks.

You can use the acronym **TACO** to remember to record:

- Time when the bag of water broke
- Amount of fluid
- Color of fluid
- Oddour of fluid

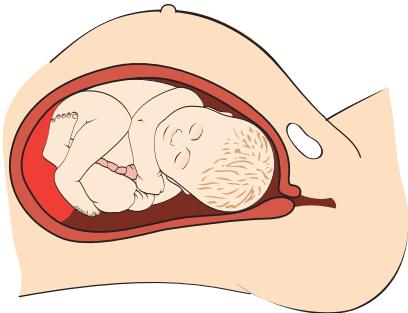
- If you are planning a home birth, contact your midwife when you have signs of labour.

It is best to stay at home during early labour. Resting, taking a shower, going for a walk or watching a movie are all great ways to cope with early labour.



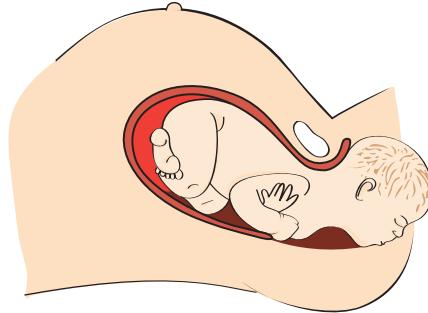
6. What are the four stages of labour?

Labour can be divided in four stages:



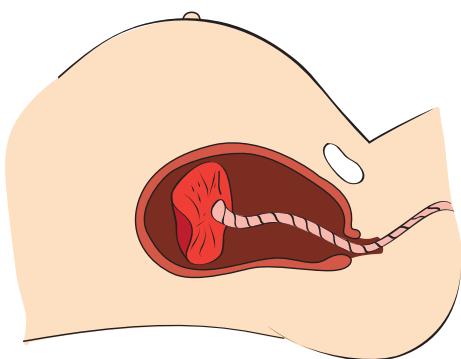
Stage 1: Labour

Your contractions will slowly get stronger. They will happen more often and last longer. By the end of this stage your cervix will be thinner (effaced) and will open (dilate) to 10 cm. Your baby will move down into your pelvis.



Stage 2: Birth of Baby

You will have more contractions. They will be very strong. You will feel the need to push. Your baby will be born.



Stage 3: Release of Placenta

Not long after your baby is born, you will feel some mild contractions again. You will then be able to push out the placenta. This is usually a quick process. If the placenta does not come on its own, your health care provider may need to remove it for you.



Stage 4: Recovery

During this stage you will be resting after labour and birth. You will be spending time with your baby. Skin-to-skin contact with your baby will help you bond with your baby and will keep your baby warm. It will help your baby find your breast and latch on to your nipple. This is a good time to start breastfeeding.

7. What can help you stay comfortable during your labour?

Here are some tips that you and your partner can use to help you learn to relax. This may make labour more comfortable and will help the baby move down into the birth canal.

Learn breathing techniques such as how to:

- Breathe slowly and rhythmically in through the nose and out through the mouth.
- Take light (shallow) breaths in and out of your mouth.
- Take short quick breaths in and out of your mouth.

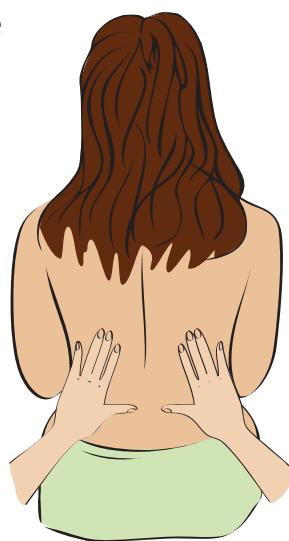
You can learn the breathing techniques in prenatal classes or ask someone to show you. Practicing your breathing techniques alone or with your coach will help you to prevent hyperventilating.



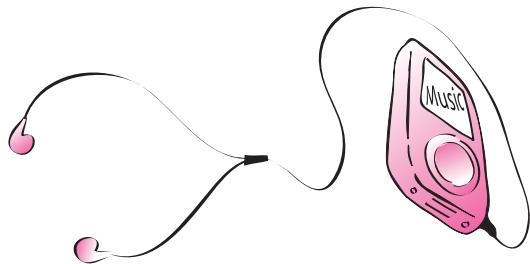
Try to find something to look at or think about during your contractions.



Ask your support person to massage different parts of your body. If your lower back hurts, ask your support person to apply steady pressure on your lower back.



Listen to music.



Drink juice or water, or chew on ice chips.

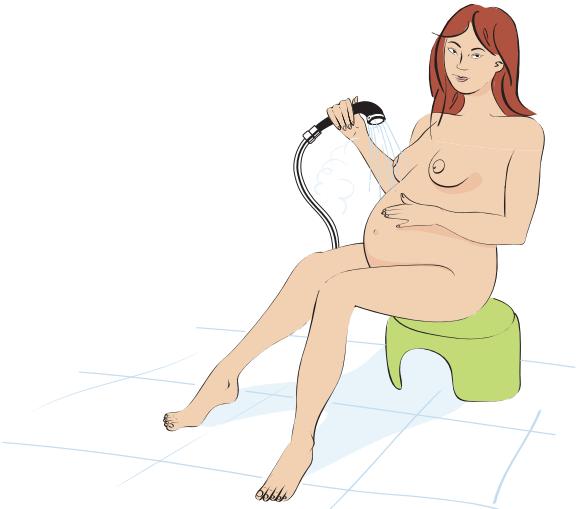
Eat small amounts of food.



Go to the toilet to pass urine at least every hour.



Have a shower or a bath.



Some women want medications to help reduce the pain. Talk to your health care provider about the kinds of pain medications that might help. Ask questions about the benefits and risks to you and your baby, as well as the alternatives, so that you can make an informed decision about using them or not.

8. What are some comfortable positions for labour?

Try some of these positions to find the ones you like. It is important to change positions during labour. Doing so will help you to stay comfortable and will help your baby move down.



9. What medical procedures are sometimes used during labour and birth?

There are several medical procedures that your health care provider may use. Sometimes, babies need some help to be born. During your prenatal visits talk about what medical procedures your health care provider may use during labour and birth. This will help you to be aware of the risks and benefits, for you and your baby, of each procedure as well as the alternatives so you can make an informed decision during labour. When in labour, choose the method(s) that works best for you and your baby.

Induction

Labour may need to be started for you because the baby is overdue, for special health reasons or because the bag of water breaks but there are no contractions. This can be done with special medication (oxytocin). If your bag of water is not broken, your health care provider may suggest breaking it for you before starting the medication.



Augmentation

Breaking your water and/or the use of oxytocin can help if your labour is slow to progress.

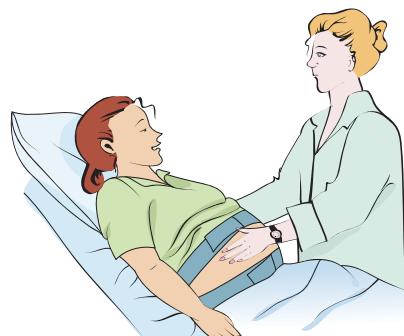
Pain Medication

- *Intravenous Infusion (IV)* may be used to give you fluids, medication, or pain medication through your arm.
- An *Epidural* may be used to give you pain medication through your lower back. An epidural anesthetic numbs the lower part of your body.



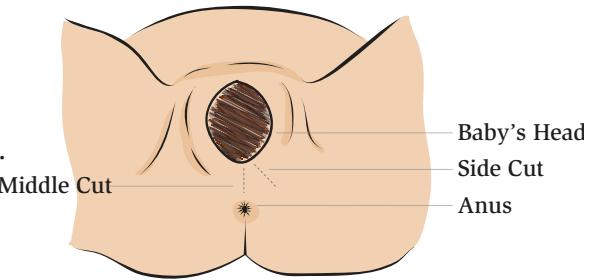
Fetal Monitoring

- During labour, your baby's heart rate will be checked.
- Your health care provider will use a hand-held stethoscope called a Doppler.
- A machine called a “fetal monitor” may be used to listen to the baby’s heartbeat.
- Monitoring also includes recording and measuring the contractions.



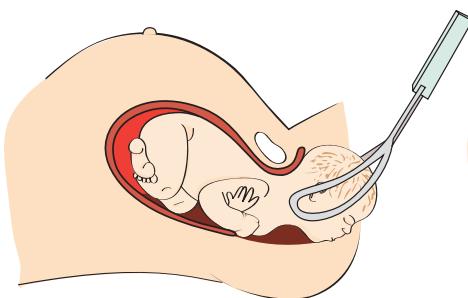
Episiotomy

- This is a small cut to make the opening of the vagina bigger.
- An episiotomy is not a routine part of labour.
- Freezing is usually given first.
- You will need to have stitches.

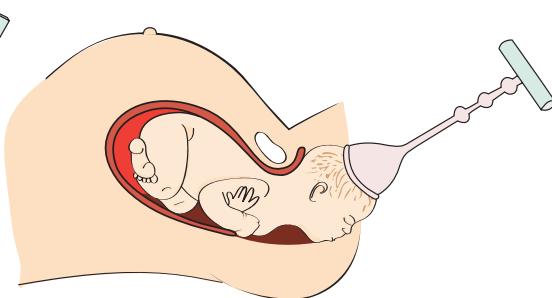


Forceps and Vacuum Extraction

- Forceps are a spoon-like tool that fits around the baby's head.
- Vacuum extraction uses a soft cup that fits on top of the baby's head and is attached to a machine.
- They are used when:
 - The baby is not in a good position to be born.
 - The baby needs to be born quickly.
 - The mother is very tired and can't push any more.



Forceps



Vacuum Extraction

Caesarean Birth (C-section)

- This involves the baby being born through a cut in your abdomen and uterus.
- There are many reasons why a caesarean birth may be recommended:
 - The baby is very big.
 - The baby is lying with its legs down instead of its head.
 - Special health reasons.
 - Problems with the umbilical cord or placenta.
 - The baby needs to be born quickly.
 - Labour is not progressing normally.
- Having a caesarean birth may be unexpected. Your health care provider will let you know if a C-section is needed to help your baby be born safely.

10. What can you expect right after the birth?

Right after the birth of your baby, place him skin-to-skin.

Skin-to-skin means your baby is wearing just a diaper (and maybe a hat) and his bare skin is against your bare chest and tummy. Your baby will be wiped dry and a blanket will keep you both warm.

Even if your baby isn't ready to breastfeed right away, it is good for him to stay skin-to-skin without interruption for at least one to two hours, or until he is ready to feed. Being skin-to-skin will help your baby:

- Be calmer.
- Breathe better.
- Have normal blood sugar.
- Stay warm.

Holding your baby skin-to-skin also promotes:

- Better milk flow and production.
- Bonding (the process of developing an emotional connection to your baby).

Skin-to-skin contact at any time has benefits for both you and your baby. Fathers, partners, and support persons can also hold baby skin-to-skin. Skin-to-skin cuddling and breastfeeding also help if your baby has to have a blood test or other painful procedure.



Your baby will have an exam by a doctor – to assess her overall health (called Apgar score). Other interventions will be:

- Vitamin K injection in her thigh.
- Antibiotic eye ointment.
- Heel-stick blood test to check for a variety of disorders (called newborn screening test).
- Hearing screening test.

You will have an exam by a doctor. The health care team will make sure that you're doing well and to answer your questions. Interventions can be:

- Check that the placenta is delivered.
- Check your uterus by pressing lightly on your stomach.
- Check your vaginal bleeding.
- If you had an episiotomy or tear, or if you had a caesarean birth, you will have stiches.

11. Who are your important contacts?

My Personal Help

Name and Title

(partner, family, friends, neighbours, peer support, community drop-ins, blogs, etc.)

Contact Information

(phone numbers, emails, web links, and addresses)

My Health Care Providers

Name and Title

(doctor, midwife, nurse, nurse practitioner, lactation consultant/clinics, dietician, doula/labour support person, etc.)

Contact Information

(office number, cell numbers, emails, web links, addresses)

Emergency (Fire / Police / Ambulance): **911**

Telehealth Ontario 24/7: Free medical advice

1-866-797-0000 or www.ontario.ca/page/get-medical-advice-telehealth-ontario

Your local public health unit:

To find out about programs and services close to you and offered by a public health unit

EatRight Ontario: Speak with a Registered Dietitian for free

1-877-510-5102 or visit www.eatrightontario.ca

FASD Ontario: This website offers information and counseling on alcohol and substance use
www.fasdON.ca

Bilingual Online Ontario Breastfeeding Services

Search for breastfeeding services near you www.ontariobreastfeeds.ca

Questions for your health care provider

1. _____
2. _____
3. _____

Some Resources to Know More About Labour and Birth

Healthy Birth Practices

The Lamaze Healthy Birth Practices are designed to help simplify your birth process with a natural approach that helps alleviate your fears and manage pain
www.lamaze.org/healthybirthpractices

Normal, Healthy Childbirth for Women & Families: What You Need to Know

A woman's guide to understanding normal, healthy birth and how it can improve the health of her baby and her health
www.midwife.org/ACNM/files/ccLibraryFiles/FILENAME/000000003184/normalbirthandyou-092514.pdf

Pathway to a Healthy Birth

Information about birth hormones and their job of guiding you and your baby on the path to a healthy birth
www.nationalpartnership.org/research-library/maternal-health/pathway-to-a-healthy-birth-booklet.pdf

Preterm Labour Signs & Symptoms Brochure

Provides critical information on how to recognize preterm labour signs and symptoms and when to seek help
www.en.beststart.org/for_parents/are-you-or-your-partner-pregnant

Mom and Baby to Be

A dynamic, easy to use prenatal app with the tools you need for a healthy pregnancy. Includes interactive pregnancy tools (e.g. Fertility Tracking, Contraction Counter, plus more)
<https://itunes.apple.com/app/mom-and-baby-to-be/id560579312?mt=8>

OMama

A website and app that connects women and families to trusted, evidence-informed healthy pregnancy, birth and early parenting information for Ontario
www.omama.com

Some Resources to Know More About Getting Ready for Baby

My Breastfeeding Guide

Find information and answers to questions you may have as an expectant parent or as a new parent

www.beststart.org/resources/breastfeeding/BSRC_My_Breastfeeding_Guide_EN.pdf

Sleep Well, Sleep Safe

This booklet is for parents of infants from 0-12 months and for all who care for infants

www.beststart.org/resources/hlthy_chld_dev/pdf/BSRC_Sleep_Well_resource_FNL_LR.pdf

What to Expect in the First Three Months – Information for New Parents

This handout will provide you with important information on what to expect in the first three months after your baby is born

www.beststart.org/resources/hlthy_chld_dev/K82-E-hospitalhandout.pdf



We would like to thank the parents and the experts who provided input on this guide.

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