

How you might experience labour

Everybody is different so it is hard to tell how you will respond to labour. There are a number of physical factors that can cause discomfort or pain in labour, for example, the stretching of the cervix and ligaments, and the pressure of the baby as he/she moves into the pelvis and through the birth canal. The vast majority of women experience strong sensations during contractions, which many describe as painful. Some describe their experience of labour as mild to moderate, most as intense. Each woman's experience of sensation during labour is unique to her. Your past experience of pain, the support you have from those you love, fatigue, fear, anxiety, and tension, are all factors that may also affect your perceptions during labour.

This list is doesn't represent the total range of feelings and emotions you may go through in labour – but it might give you an idea of things you may wish to talk about beforehand.

What's happening to your body	How you may feel	What you can do	What you can do as a partner
Last weeks of pregnancy <ul style="list-style-type: none"> - Engagement - Lightening - More frequent tightening of the uterus - More vaginal discharge - Frequent urination - Difficulty finding a comfortable sleeping position - May have persistent low backache 	<ul style="list-style-type: none"> - Energetic - Excited - Wishing labour and birth were finished 	<ul style="list-style-type: none"> - Conserve your energy - Get things ready for your birth - Continue to practice relaxation and breathing techniques daily - Have a daily walk 	<ul style="list-style-type: none"> - Encourage her to rest - Provide diversion - take walks, eat out, etc. - Practice relaxation and breathing techniques with her

<p>The beginning of labour</p> <ul style="list-style-type: none"> - Contractions that may feel like menstrual cramps or lower back pain. - They may be hard and gripping, or may radiate from the lower back to lower abdomen - Bloody or pink "show" - Leaking or rupture of membranes - Frequent bowel movements, often loose 	<ul style="list-style-type: none"> - Excited - Relieved - Apprehensive - Talkative 	<ul style="list-style-type: none"> - Eat to appetite in early labour - Keep a mental record of your progress - Observe your contractions, are the sensations changing or becoming more frequent? - Call us if you have any concerns - Continue your usual activities - Contact us when your membranes rupture or the contractions are 5 minutes apart (pending on how far away we are) or if you need to talk <p>Use a sanitary pad if water breaks</p>	<ul style="list-style-type: none"> - Observe the contractions <p>Reassure her (of her readiness for labour)</p> <ul style="list-style-type: none"> - If at night encourage her to sleep and sleep yourself
<p>Early first stage (latent stage)</p> <ul style="list-style-type: none"> - Cervix effaces (thins) and begins to dilate to 3-4 cm - Contractions are often irregular, may be 5-30 minutes apart and last 20-30 seconds - Contractions will become longer, stronger and closer together lasting 40-60 seconds - This is the longest stage 	<ul style="list-style-type: none"> - Excited - Thoughts centre on self labour & baby - Talkative or quiet - Calm or tense <p>Able to cope with sensation</p> <ul style="list-style-type: none"> - Some women may experience anxiety coping with the sensations 	<ul style="list-style-type: none"> - Begin slow rhythmic breathing during contractions as necessary - Use abdominal massage, pelvic rocking during contractions - Empty bladder regularly - Eat and/drink easily available food that you like - Drink plenty of liquids - Relax between contractions - Use upright positions as much as possible - Lie on your side when lying down, lying on your left side is best 	<ul style="list-style-type: none"> - Provide your undivided attention and immediate response to contractions - Keep observing the contractions - Remind her to relax-use touch relaxation - Give her encouragement and praise her - Help her with breathing, if necessary <p>Encourage walking</p> <ul style="list-style-type: none"> - Remind her to empty her bladder - Use distractions- play cards, games, watch a

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<p>First stage (active phase)</p> <ul style="list-style-type: none"> - Cervix becomes thin and dilates from 5-8 cm - Contractions are 2-3 minutes apart, last 40-60 seconds with greater intensity and longer peaks - Contractions are more powerful- the experience of pain also increase in intensity, frequency and last longer - May experience back labour as mild to severe backache - This is a shorter stage than the first one 	<ul style="list-style-type: none"> - Not talkative - Needing to concentrate more - Sometimes anxious - Apprehensive- doubts about ability to handle pain of labour - Serious mood - birth oriented - Want companionship and encouragement - Attention is turned inward 	<ul style="list-style-type: none"> - Use slow rhythmic breathing as long as it works - - Use focal point - Use effleurage as desired - Continue pelvic rocking between contractions - Change position regularly - Rest between contractions - Continue to empty bladder regularly - Try changing positions and pain management techniques you have practiced 	<ul style="list-style-type: none"> - If walking, support her during contractions - Assist with effleurage or back rubs - Provide cool wash cloth for her face - Give ice cubes to suck on - Offer frequent words of encouragement to offset her possible apprehension - Remind her to change position and empty bladder - Keep her encouraged of her progress - Encourage relaxation and assist with breathing
<p>Late first stage (Transition)</p> <ul style="list-style-type: none"> - Cervix becomes completely dilated from 8-10 cm - Very strong contractions lasting 60-90 seconds - These contractions peak quickly and come 1- 	<ul style="list-style-type: none"> - Perspiration on forehead or upper lip - Shivering tremors of the thighs - Sometimes nausea, vomiting - Alternating hot/cold feeling - Cold feet - Experience of contractions 	<ul style="list-style-type: none"> - Remember this phase is intense, but short - Take one contraction at a time - Do light abdominal massage, and inner thigh massage - You may wear socks, be covered with warm blanket - Relax between contractions 	<ul style="list-style-type: none"> - Don't leave her for any reason - Remind her it is transition - labour is almost over- and the baby is coming - Praise her lavishly for her efforts - Breathe with her - have her

<p>2 minutes apart with possibly more than one peak</p> <ul style="list-style-type: none"> - Sometimes nausea and/or vomiting - Increase show - Membranes may rupture if this has not happened previously. 	<p>can be very intense- very little time between each contraction to catch your breath</p> <ul style="list-style-type: none"> - Sometimes panicky, you might feel like giving up - Irritable, you might not want to be touched - Forgetful, disoriented difficulty remembering - Rectal pressure, sometimes a premature urge to push - Lonely, irritable and focused on yourself - Vague in communicating 	<ul style="list-style-type: none"> - Don't hold your breath - Try not to push until the urge becomes irresistible - Try "blowing away" the urge to push 	<p>imitate you</p> <ul style="list-style-type: none"> - Help her begin breathing at start of contraction so that she does not feel that the contraction has gotten ahead of her -Wipe her forehead with washcloth - Keep calm - Apply back pressure - Help her relax between contractions - Be positive - Be prepared for her to get cross
<p>Second Stage</p> <ul style="list-style-type: none"> - Dilatation complete - Contractions may stop for a period of time. - Baby is being pushed through birth canal, head crowns -Contractions last about 60-75 seconds and come every 3-5 minutes apart - May have a resting period before contractions build up again - Contractions may feel less strong than in the 	<ul style="list-style-type: none"> - Excited/tired - Determined and concentrated - Renewed energy level - May have a strong urge to push - May not have a strong urge to push - Relieved to be able to push - Scared to push - Warm tingling or burning sensation of the perineum, "ring of fire" - Pressure on rectum (you may fear you are having a 	<ul style="list-style-type: none"> - Wait until you can't resist the urge to push. - Wait for the contractions to start again before starting to push - Get into a comfortable pushing position -Push only when you feel the contractions -Push with your body and instincts - Give yourself time to get into a rhythm of pushing - Relax the muscles of the perineum - Relax between contractions - Pant or blow as the head is being delivered 	<ul style="list-style-type: none"> - Help her get into a comfortable position for pushing - Share the positive feelings you experience as your baby is being born - Remind her to pant or blow as head is delivered - Remind her to relax her perineum, check her face for relaxation - Remind her to keep her eyes open to see baby being born

<p>transition period</p> <ul style="list-style-type: none"> - Birth of head, shoulders and then rest of baby - Baby is born 	<p>bowel movement</p>		
<p>Third Stage</p> <ul style="list-style-type: none"> - Separation and delivery of the placenta, a few contractions are generally necessary to complete this stage <p>Can be anything from a few minutes to over an hour (dependent on type of third stage)</p>	<ul style="list-style-type: none"> - Happy - Relieved - May be quite uncomfortable, - Tired, - Emotionally high, proud - Trembling, chilled 	<ul style="list-style-type: none"> - Wait for the sensation of your placenta separating - Hold and soothe your baby and get to know him or her - Put baby to the breast 	<ul style="list-style-type: none"> - Share in the joy of your baby - Hug and cuddle baby and partner
<p>Fourth stage</p> <p><i>The Mother</i></p> <p>When you are ready</p> <ul style="list-style-type: none"> - Examination of perineum and stitching if needed - Post birth observations of Pulse, Temp, BP, Lochia and Contraction of the uterus - Rhesus bloods if required 	<ul style="list-style-type: none"> - Happy, tired, - Hungry and thirsty - Proud - You are a mother 	<ul style="list-style-type: none"> - Examine, caress, nurse and talk to baby - Make eye contact with baby - Put your baby to your breast to initiate breastfeeding as soon as possible - Eat and drink - Have a bath or shower as you please 	<ul style="list-style-type: none"> - Share the new physical and emotional bonding experience with your baby and your partner - Hold your baby - Help your partner to initiate breastfeeding - Take pictures - Share the wonderful news, make phone calls - You are the proud father/parent of a new baby

<p><i>The Baby</i></p> <p>When you are ready</p> <ul style="list-style-type: none">- Your baby is given a head to toe examination- The baby is weighed- Head circumference- Body length- Vitamin K given if requested			
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