Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Ruptured Membranes Before Labour v7

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Ruptured Membranes Before Labour

Patient Information

Maternity Services

- Author ID: AV
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Introduction

This leaflet is to explain what will happen now you have come to hospital and it has been confirmed that your waters have broken (membranes ruptured) but you are not yet in labour. The information only applies if you are more than 37 weeks pregnant).

Effect of ruptured membranes

The waters will break before the onset of labour in up to 20% of pregnancies. Once the waters break the baby is no longer well protected from infection travelling upwards from the vagina. Fortunately most people will start in labour soon after the waters break but in some cases there can be a delay.

- 60% of women will labour within 24 hours
- 91% will labour within 24 to 47 hours
- 94% will labour within 48 to 95 hours
- 6% of women will not be in labour after 96 hours.

Deciding about induction of labour

Once you think your waters have broken, a midwife or doctor will check both you and your baby. The next step is to make a plan together in case you do not go into labour within 24 hours.

If you have a temperature or if the baby's heart rate does not seem entirely normal it is advisable to induce labour straight away so as to deliver the baby as soon as possible.

If everything seems to be entirely normal then you will need to consider the following facts:

- The longer it is between the waters breaking and delivery the more likely it is that you or your baby will develop an infection although this risk is not very high.
- Immediate induction of labour will reduce this risk. The risk of infection for the baby is about 2% (2 out of 100 babies) if you wait and see and 1% (1 out of 100) if you are induced immediately. If you went into labour without your waters breaking then the risk of infection would be 0.5%.
- Induction of labour may be something that you had hoped to avoid and if this is the case it is very reasonable to wait and see if labour starts in the next 24 hours.
- Most women go home to wait for labour to start and then come back to hospital the morning after 24 hours have passed so that we can make a plan together for induction of labour.

Ways of inducing labour

Once it has been decided to induce labour there are two methods of doing this.

a. Prostaglandin tablets placed in the vagina.

b. Oxytocin (Syntocinon) drip into a vein in the arm

The method used will depend on how soft and stretchy your cervix is. This will be checked through an internal examination. Our routine policy is to give one prostaglandin tablet if the cervix is not soft and stretchy and then commence a hormone drip (syntocinon) to start contractions to help you get into labour

You are no more likely to need a Caesarean Section than other women who went into labour on their own.

Going home to wait and see

You will be given sheets to plot your temperature every 4 hours (whilst you are awake). If your temperature is above 37.4^{o}C and you feel unwell or your ‘waters’ become discoloured, blood stained or offensive, you should come to hospital immediately.

Having a bath or shower does not increase your risk of infection. Baths can be very useful to help with the pains of early labour. Please be aware that having sexual intercourse can increase the risks of infection.

We normally suggest induction 24 hours after your waters have broken and strongly advise against waiting longer than 96 hours because of the risk of infection. You will be given a time to come back to hospital to start the induction

Changing your mind

If you do decide not to have labour induced you can of course change your mind and an induction of labour will be organised.

If you have any questions, please do not hesitate to discuss them with your doctor or a midwife.

Delivery Suite	01942 778505
Maternity Triage	01942 778628
Antenatal Clinic Wigan	01942 774700
Antenatal Clinic Leigh	01942 264242



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