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اگرآپ إس كاأردوز بان ميں ترجمه چاہتے ہيں، تو براؤ كرم إس فون نمبر 723553 01932 پر رابطه كريں

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Jeżeli chcemy, aby te informacje w innym języku, proszę zadzwonić 01932 723553

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Induction of Labour with Cervical **Ripening Balloon**

Women's Health



Useful Contacts

Maternity Triage	01932 722835
Labour ward	01932 722864 01932 722663
Joan Booker Ward	01932 722291 01932 722378 01932 722660

Further Information

Pregnancy Advice Line

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty.

0300 1235473

If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email asp-tr.patient.advice@nhs.net. If you remain concerned, the team can also advise upon how to make a formal complaint.

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Useful Links

Royal College of Obstetrics and Gynaecology www.rcog.org.uk

National Institute for Health and Care Excellence Clinical Guideline 'Inducing labour'.

https://www.nice.org.uk/guidance/cg70/chapter/1-Guidance#information-and-decision-making

National Institute for Health and Care Excellence Information for the public 'Inducing Labour'. https://www.nice.org.uk/guidance/cg70/ifp/chapter/About-this-information

National Institute for Health and Care Excellence
Insertion of a double balloon catheter for induction of labour in
pregnant women without previous caesarean section. NICE,
2015. https://www.nice.org.uk/guidance/ipg528

National Institute for Health and Care Excellence Clinical guideline 'Intrapartum care for healthy women and babies'.

https://www.nice.org.uk/guidance/cg190

Information for women having an induction of labour using Cervical Ripening Balloon

Having a baby is a very special time in the life of a woman and her family and we want to do our best to ensure you have a good and safe experience.

Induction of labour is a process where we use different medications or devices to enable changes in your cervix (neck of the womb) to occur in order to break your waters and help you to go into labour. Induction is recommended from 41 weeks (NICE guidelines July 2008). There are a number of reasons why induction of labour is recommended. Your doctor or midwife will explain the reason for induction with you before offering you an induction. They will also discuss the benefits and risks of the process with you.

You doctor or midwife may also offer you a membrane sweep which may help to start natural labour without the need for using any of the induction methods discussed below.

Inducing labour takes time, sometimes a couple of days and may follow a number of steps. These could include softening (or ripening) your cervix, breaking your waters, and giving you a hormone drip through your vein to encourage your contractions to start. All these steps may not be necessary for you. This leaflet gives you information about the first stage of inducing your labour by ripening your cervix using a 'cervical ripening balloon catheter' e.g. the double balloon catheter Cook® Balloon or the single balloon catheter.

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What is a Cook® Balloon?

A Cook® Balloon is a silicone tube which has two inflatable balloons which are inserted and inflated with a safe fluid, 'normal saline', and deflated before removal. Though NICE recognises the use of this method of induction in women without prior Caesarean section, most units in the UK are now using this routinely for women who have had a previous single lower segment Caesarean section.

A single balloon catheter may be used as this has a similar success rate as the double catheter.

What do I need to do on the day of my induction?

You should telephone labour ward at 0700 hours on the day your induction to confirm what time to come to labour ward to start your induction. Labour ward is located on the third floor of the Abbey Wing. You induction will usually start at 0800 hours.

The telephone number for Labour ward is 01932 722864 or 01932 722663. Please come with your maternity bag as you will usually remain in hospital till you deliver your baby.

You will initially be admitted to the labour ward so we can insert the cervical ripening balloon. Once this is done and the safety checks are completed, you will be transferred to the antenatal ward and encouraged to mobilise. Once we can break your waters or labour starts, you will be transferred back to labour ward.

What if my cervix has not changed?

If there has been no change in your cervix, the doctor will discuss further options with you at this time. These may include:

- Prostaglandins if this has not been previously used.
- Your induction may be deferred and re-started on another day depending on the reason for the induction and your wishes.
- A caesarean section.

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Can the Cervical Ripening balloon be removed before 24 hours?

If labour starts or your water breaks or there are any concerns, the Cervical Ripening Balloon may be removed earlier than 24 hours.

Some clinicians may prefer to remove the balloon at 12 hours in keeping with the manufacture's recommendation. Most maternity units in the UK leave the balloon for 12- 24 hours so we can make the cervix as favourable as possible. Keeping the balloon for 24 hours doesn't put you or your baby at any risk.

Is it harmful if the balloon is left for longer than 24 hours?

This is not likely to be harmful but we will aim to remove the balloon by 24 hours. Please alert the midwifery or medical staff if the balloon hasn't been removed as planned after 24 hours of insertion.

On some occasions a decision may be taken to delay your induction. This could be because another mother has a greater need for medical intervention and this may happen at any point during your admission. This is to ensure the safety of all mothers and babies. This will be discussed with you and will be based on your individual circumstance.

When you are asked to come in, you are welcome to bring one birthing partner with you. Up to two birthing partners may stay with you **once you are in established labour**.

What is Induction of labour with Cervical Ripening Balloon?

On admission we will discuss the reason for induction as well as the risks and benefits. We will confirm you agree to proceed with induction using the cervical ripening balloon. We will do a CTG (heart trace monitoring of your baby) to ensure the baby is healthy before we start the induction. We will position you and insert the cervical balloon into the cervix.

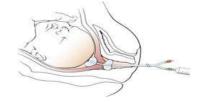
The first of the two balloons is inflated with a safe liquid called 'normal saline' on the uterine side of the cervix and the second is then inflated with normal saline in the vaginal side of the cervix. See image below. The two balloons then adapt to the contour of the cervical canal to minimise discomfort. A single balloon catheter may also be used instead. The effect and result are similar to the double balloon catheter.

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Due to the pressure effect from the fluid filled balloon/s, the Cervical Ripening Balloon will naturally and gradually help to dilate (open) the cervix. This also causes the release of some hormones that can help initiate labour. You may experience some discomfort as this happens. You will be prescribed some pain killers and you may request for this if required. After 24 hours, the catheter will be deflated and removed. The cervix will be assessed for dilatation and based on the findings a plan will be made with you regarding the next stage of the induction of labour.

The balloon may fall out on its own. This is can be a good sign and it usually means the cervix has dilated. Please inform your midwife if this happens. See images below of a double balloon catheter.





What are the benefits of the Cervical Ripening Balloon?

The Cervical Ripening Balloon safely softens and opens the cervix without the use of medications, and therefore reduces potential side effects. The silicone balloon adapts to the individual shape of the cervical canal. The balloon is easily inserted and removed.

What happens 24 hours after the Cervical Ripening balloon is inserted?

- The Cervical Ripening Balloon will be deflated before being removed.
- An internal assessment will be undertaken to determine if your waters can be broken. If this is possible, you will be advised to mobilise for a few hours to allow for baby's head to descend. This helps to reduce the rare chance of the cord coming down when your water is broken.
- When a delivery bed becomes available you will be transferred to the delivery suite for your waters to be broken. Following this you may be advised to mobilise for a few hours to allow time for contractions to start. If the contractions do not start or remain irregular, your doctor will discuss the risk and benefits of using the hormone drip to help start your contractions.

When should I speak to a midwife or doctor?

- If you experience regular contractions (1 contraction every 5 minutes).
- If your waters break.
- If the Cervical Ripening Balloon falls out.
- If there is any bleeding, more so if this is heavy.
- If you experience constant abdominal pain
- If you are worried.