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You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

If you are unhappy with the advice you have been given by your GP, consultant, or another healthcare professional, you may ask for a second (or further) opinion.

The evidence used in the preparation of this leaflet is available on request. Please email: patient.information@salisbury.nhs.uk if you would like a reference list.

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The latent phase of labour (page 1 of 4)

Labour is a journey, which can take a long time, and every woman's labour is different.

Things you can do to help yourself before labour starts

Remember your body already knows how to give birth. When you understand what helps or hinders the natural process you can create the right environment around you.

- communicate with your midwife during pregnancy – make sure that you find as much information as you can from her - remember you are 'partners in care'
- attend antenatal classes and active birth workshops
- you may want to use the internet such as National Childbirth Trust website: www.nct.org.uk
- the Pregnancy Book is a complete guide to keeping healthy in pregnancy, labour and childbirth and the first weeks with your baby. It is available online; www.healthpromotionagency.org.uk/Resources/children/pdfs/pregnancybook_opt.pdf
- write a birth plan so we can understand your needs and feelings about labour
- aim to visualise a positive outcome to your labour, such as holding your baby in your arms
- think positively about the strength and reliability of your body.

Labour has 3 stages:

- the first stage, when the neck of the womb (cervix) opens to 10cm
- the second stage, when the baby moves down through the vagina and is born
- the third stage, when the afterbirth (placenta) is delivered.



Closed cervix



Cervix drawn up and thinner



Neck of the womb (cervix) 3 - 4 cm

Labour Ward
01722 425183

Before labour starts, the neck of the womb (cervix) is long, firm and closed, but even before labour begins the cervix can be drawn up and get thinner. This flattening is called cervical effacement.

What is the latent phase of labour?

The latent phase of labour is the early part of the first stage, when there are painful contractions which are not necessarily continuous and there is also some cervical changes, including cervical effacement and dilatation (opening) up to 4cm.

During this phase the neck of the womb thins and opens (dilates) up to about 3 to 4cm.

Some women have a very quick latent phase, but it typically lasts anywhere between 4 and 24 hours. For some it may last several days, or even weeks. Some women can have backache or cramps during this phase, while some others have bouts of contractions lasting a few hours which then stop and start up again the next day. If your contractions stop, it is a good time to rest and make sure you have something to eat. When your body has built up some energy supplies, your contractions will start again. This is normal.

Some women feel the contractions so strongly that they are convinced this is active labour. This can lead to early admission to hospital, followed by disappointment when they find they are still in the latent phase. Studies have shown that women admitted to hospital in the latent phase have higher rates of intervention.

The best place to be during the latent phase is at home with good psychological support from your birthing partner. This can be difficult to do. Having information about this phase can help you to know what to expect and stay at home, increasing your chance of a natural birthing experience.

What else can you expect in the latent phase?

- you may experience some blood stained discharge called 'a show'. This can occur days or even weeks before labour begins
- contractions in your lower back or abdomen, varying from cramping to tight and painful. These may vary in frequency, coming often and feeling strong, then less intense and further apart
- increased pelvic pressure as your baby descends into the pelvis, causing increased vaginal discharge
- it is common to have irregular tightenings for a few hours, which fizzle out completely. This is entirely normal. Your body is preparing in small stages
- your membranes may rupture (water breaking), which can be a slow leak or a gush. Either way contact Labour Ward to let us know - 01722 425183

These are all good signs – your body is preparing for the journey ahead. Be patient, you will give birth when your body is ready.

Position of your baby

The position of your baby has an important impact on your labour. The best position is for your baby to be lying with its back towards your stomach. This is called an OA (occipito anterior) position where the baby is facing your spine. Labour with the baby in this position progresses more easily.

Sometimes a baby is lying with its back to your back. This is called an OP position (occipito posterior) where the baby is facing forwards towards your abdomen. This can cause a delay in the latent phase, as your body is trying to turn the baby into the OA position. If your baby is in the back-to-back position it can give you a lot of back pain during contractions. Regardless of which way the baby is facing, there are several things to ensure the baby is in the best position for labour. These include:

- **pelvic rocking** – this can be done by getting onto your hands and knees into an all fours position or leaning over a bed and rocking your pelvis from side to side.
- **sideways walking up the stairs**
- **never slouching when sitting**, as gravity encourages the baby to stay in the posterior position.
- **when resting lie on your side**
- **using a birthing ball**. Gentle bouncing or rocking on the ball whilst sitting on it with your legs apart encourages the baby to turn into the best position for labour.

Coping mechanisms for the latent phase

Taking a long warm bath. This is to help you to relax, rather than for cleaning yourself. It is important that you lie on your side in the bath rather than on your back. The bath water should also completely cover your bump.

Using a TENS machine, but the machine should not be used in the bath!

Slow, steady breathing through your contractions. When your contraction starts, focus on your breathing, rather than the discomfort of the contraction. This is a good distraction technique that your birthing partner can also help with.

Take simple pain relief tablets such as paracetamol. 1000mg (2 tablets) 4-6 hourly. Maximum 8 tablets in 24 hours. Remember though, you should not take non-steroidal anti-inflammatory drugs such as ibuprofen in pregnancy.

Ask your partner or labour supporter to give you a **massage**.

Pottering around the house or taking a walk.

Distractions such as watching a DVD or listening to your favourite music, gardening, chatting to friends.

If it's night time, try and to **sleep** as much as you can.

Eat and drink normally – being well hydrated and having food energy on board can help labour move into the active phase. Drinking plenty of fluids – water, isotonic sports drinks and fruit juice are all good.

Trying a **soft-gel sports injury pack** which you have cooled in the freezer – this can help with backache.

Keeping as mobile as you can, while remembering to save your energy for the active part of labour.

Experimenting with positions that you find comfortable. There are advantages to staying upright and mobile in labour. This can mean standing, sitting, squatting, kneeling and walking around. You may find a birthing ball, a floor mat or a beanbag useful. If you are tired you could try resting on your side, or sitting backwards on a chair leaning over the backrest – you might need pillows to rest against.

Kissing, cuddling and having an orgasm all cause your body to produce oxytocin. This is the hormone which is also produced in labour and which makes the uterus contract.

Alternative therapies can also work. Aromatherapy, acupuncture, hypno-birthing and massage from a qualified practitioner can help you manage.

Keep calm and relaxed so the body can produce the hormone oxytocin. Home is often the place where you will feel most relaxed and where you will be more likely to produce oxytocin. Stress causes a release of adrenalin which can inhibit labour, increase its length and make the contractions feel more painful. Often the move from home to hospital can result in a release of adrenalin.

If you go to hospital in the latent phase, the midwife will encourage you to return home to relax and allow the hormones to work with your body. If you are concerned about any symptoms you have, feel free to call the Labour Ward at any time.

You can help your labour to carry on smoothly by avoiding stimulating the ‘rational’ part of your brain. You need peace, quiet and a feeling of safety to help you relax and so increase the levels of your own natural pain relievers – known as endorphins.

During labour, you can take measures such as avoiding:

- bright lights
- people asking you questions which you have to think to answer
- people talking to you during contractions
- feeling as if people are watching you or judging you.

By having privacy, quiet, being in a darkened room and feeling safe your ‘rational’ brain will be less stimulated and can allow your body to help you to begin your labour. Listening to music you have chosen can also help.

If you have any bright red blood loss, or have a constant abdominal pain, or are concerned about your baby’s movements or your waters break and the fluid is green – **phone Labour Ward immediately 01722 425 183.**