

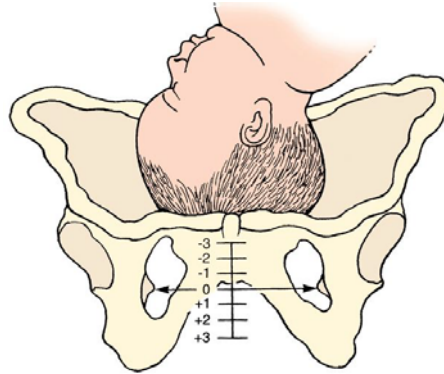
Membrane sweeps

The cervix (neck of the womb) must soften, shorten and open for labour to start. When you reach 40 weeks of pregnancy your midwife will offer you a vaginal examination to assess if your cervix is starting to ripen. Your midwife will give you a score out of 10 (known as a Bishop's score) which looks at softness, position, length, how open and how deep your baby's head is in the pelvis.

BISHOP SCORE Salisbury **NHS**
NHS FOUNDATION TRUST

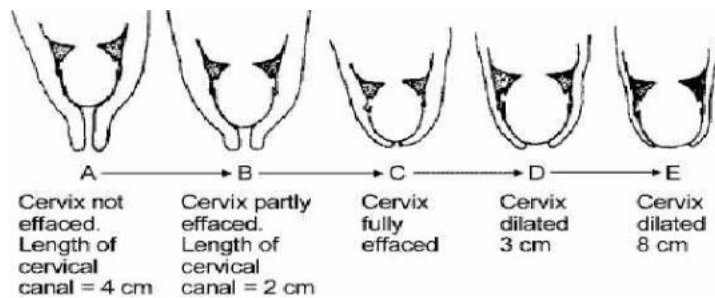
EXT. GENITALIA: _____ ABDO. PALPATION: _____ /5th PALPABLE _____

	0	1	2
POSITION OF CERVIX IN PELVIS	Posterior	Mid	Anterior
LENGTH OF CERVIX	Long 2cms	1cm	Effaced
CONSISTENCY OF CERVIX	Firm	Soft Not Stretchable	Soft Stretchable
CERVICAL DILATATION	0-1	1-2	2
PRESENTING PART IN RELATION TO SPINES	+3 Above	+2 Above	+1 Above Or Less
F.H _____ contractions			/10
DATE _____ TIME _____ SIGN _____			



Sticker used in Salisbury

Presenting part in relation to ischial spines



Effacement of Cervix

A cervix is ripe if the score is greater than 7/10. Most women, particularly those on their first baby, could have a score of 1 or 2, or even 0/10 so please don't be disheartened if you have a lower score. It is your body's job to keep your cervix closed until your baby decides they are ready to be born.

During this assessment your midwife can offer you a membrane sweep which involves putting a finger through the cervix and sweeping in a circular motion. Some trials have shown that sweeps will increase the chance of labour starting within 48 hours and of being delivered within one week.

However, other trials show that sweeps make no difference to the length of a pregnancy.

It may be important to know how ripe your cervix is or you may wish to let nature take its course and decline a sweep. Membrane sweeps have shown to be safe in that they do not increase chances of waters breaking, infection or fetal distress, however some women may find a sweep painful and you may experience some period-like pains or bleeding afterwards. Having more sweeps does not increase your chance of going into labour sooner, though your midwife can repeat a sweep one week later.

**If you would like advice please ring the labour ward at any time on
01722 425183 or 01722 425188**

Copy of info with references for governance

The cervix (neck of the womb) must soften, shorten and open for labour to start. When you reach 40 weeks of pregnancy your midwife will offer you a vaginal examination to assess if your cervix is starting to ripen. Your midwife will give you a score out of 10 (known as a Bishop's score) which looks at softness, position, length, how open and how deep your baby's head is in the pelvis. A cervix is ripe if the score is greater than 7/10. Most women, particularly those on their first baby, could have a score of 1 or 2, or even 0/10 so please do not be disheartened if you have a lower score. It is your body's job to keep your cervix closed until your baby decides they are ready to be born. During this assessment your midwife can offer you a membrane sweep which involves putting a finger through the cervix and sweeping in a circular motion. Some trials have shown that sweeps will increase the chance of labour starting within 48 hours and of being delivered within one week (Weissberg and Spellacy, 1977, McColgin et al, 1990, Keirse, 1995). However, other trials show that sweeps make no difference to the length of a pregnancy (Wong et al, 2002, Boulvain et al, 2005, Kashanian et al 2006, Rogers, 2010).

It may be important to know how ripe your cervix is or you may wish to let nature take its course and decline a sweep. Membrane sweeps have shown to be safe in that they do not increase chances of waters breaking, infection or fetal distress (Yildirim G et al. 2010), however some women may find a sweep painful and you may experience some period-like pains or bleeding afterwards (Boulvain et al, 2005). Having more sweeps does not increase your chance of going into labour sooner (Putnam et al, 2011).

**If you would like advice please ring the labour ward at any time on
01722 425183 or 01722 425188.**

Boulvain M, Stan C, Irion O. (2005) Membrane sweeping for induction of labour. *Cochrane Database of Systematic Reviews* 1: CD000451.

Foong LC, Vanaji K, Tan G, Chua S. Membrane sweeping in Conjunction with labor induction. *Obstet Gynecol* 2000; 96:539--i2

Kashanian et al 2006 effect of membrane sweeping at term on duration of pregnancy and labor induction *Gynae and Obst investigation* 62 (1): 41-4

Keirse MJNC. (1995) Stripping/sweeping membranes at term for induction of labour: In: *Pregnancy and childbirth module*. The Cochrane Pregnancy and Childbirth Database. The Cochrane Collaboration 2. Update Software: Oxford.

McColgin SW, Hampton HL, McCaul JF, Howard PR, Andrew M, Morrison JC. (1990) Stripping membranes at term: can it safely reduce the incidence of post-term pregnancies? *Obstetrics and Gynaecology*. 76: 678-80.

Putman, K et al (2011) Randomized clinical trial evaluating the frequency of membrane sweeping with an unfavorable cervix at 39 weeks *Int J Womens Health*. 2011;3:287-94.

Rogers H. (2010) Does a cervical membrane sweep in a term healthy pregnancy reduce the length of gestation? *MIDIRS Midwifery Digest*. 20(3): 315-9.

Weissberg SM, Spellacy WN. (1977) Membrane stripping to induce labour. *Journal of Reproductive Medicine* 19(3): 125-7.

Wong et al (2002) Does sweeping of membranes beyond 40 weeks reduce the need for formal induction of labour? *BJOG* 109 (6) p632-6

Yildirim G et al (2010) Membrane sweeping to induce labor in low-risk patients at term pregnancy: A randomised controlled trial *The Journal of Maternal-Fetal and Neonatal Medicine*, July 2010; 23(7): 681–687