



# What to do if you think you are in preterm labour

## Information for women, birthing people, and their families

This information leaflet is for any women or birthing people that think they might be in preterm (premature) labour. About eight out of every 100 babies in the UK are born before 37 weeks. This is called preterm or premature labour.

Preterm labour is usually something that starts by itself. But preterm labour can be planned, if it is safer to deliver your baby early than continue with your pregnancy.

### What are the risks of preterm labour?

There are risks to the baby from being born early. The earlier a baby is born, the higher their chances of health problems at birth and later in life. Sometimes we can reduce these risks by giving you specific treatments that can help to stop or slow down preterm labour / birth.

### What should I do if I think I am in preterm labour?

**If you think you might be going into preterm labour, call the hospital on the number given at the bottom of this leaflet.** The person you speak to may ask you to come in to hospital to be checked over. They may ask you to hang up and call an ambulance to bring you into hospital if they think this is safer. This may be scary / frightening, but try to keep in mind that in many cases the symptoms go away on their own, and many women and pregnant people go on to give birth after 37 weeks (full term). More than nine out of 10 women and pregnant people do not give birth within 14 days of having these symptoms (Tommy's.org, 2023).

### What are the signs of preterm labour?

- Regular contractions or tightenings, where your tummy feels very tight.
- Period-type pains or pressure in your vaginal area.
- A "show". This is when the plug of mucus that has sealed your cervix during pregnancy comes away and out of your vagina.

- A gush or trickle of fluid from your vagina, which could be your waters breaking.
- Backache that is not normal for you.

**You must tell the person you call at the hospital straight away if:**

- You are bleeding from your vagina.
- Your baby is moving less / more than normal, or moving in an unusual pattern.
- Your waters have broken and they are smelly or coloured.

**What can you do at the hospital if I come in?**

The midwife or doctor will ask if they can examine you. They may want to perform some tests to find out if:

- your waters have broken
- you have an infection, and / or
- you are in labour.

The tests that we offer may include:

- a vaginal examination to check if your cervix is opening
- blood and urine tests to check for infection
- a check of your pulse, blood pressure, and temperature
- feeling your bump to check your baby's position
- swabs from your vagina, to check for infections such as bacterial vaginosis (BV) and group B strep (GBS)
- monitoring and recording any contractions
- a check of your baby's heartbeat
- a vaginal swab to see if your body is getting ready to give birth.

**What happens if I am in preterm labour?**

The midwife or doctor will talk to you about whether it is best to birth your baby now (either by vaginal delivery or caesarean birth) or try to slow down your labour using medication. They will base this decision on:

- How many weeks pregnant you are.
- You and your baby's health.
- What facilities are available for your baby, and whether we need to move you to another hospital.
- What you want to do.

We may recommend that you be moved to a hospital with more specialised facilities for looking after premature babies.

If your waters have broken or you are going to give birth and you have a transvaginal cervical stitch, we may need to remove this. If you have a transabdominal stitch and are going to give birth, the healthcare team will prepare you for a caesarean birth.

It is likely that the team will discuss treatments both for yourself (steroid injections, magnesium sulphate) and for your baby (optimal cord clamping). These treatments are known to help babies born prematurely.

- Steroid injections help mature premature lungs.
- Magnesium sulphate can help protect the premature brain.
- Keeping baby attached to your placenta for one to two minutes after birth also helps.

### **What if you find I am not in preterm labour?**

If you are not in labour, there may be something else causing your symptoms.

The healthcare team may offer you some other investigations to try and find out what this might be. Sometimes we recommend that you stay in hospital for a while, until we find out what is causing your symptoms or your symptoms stop. This is so we can make sure you and your baby are well.

### **Further information**

- Tommy's: What is premature birth? (<https://www.tommys.org/pregnancy-information/premature-birth/what-premature-birth>)

### **Contact details**

If you think you are in preterm labour, please contact our Maternity telephone triage service on 01227 206737 for help and advice.

In an emergency, call 999.

**This leaflet has been produced with and for patients.**

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

**Any complaints, comments, concerns, or compliments** please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 783145 (tel://+441227783145), or email [ekh-tr.pals@nhs.net](mailto:ekh-tr.pals@nhs.net) ([ekh-tr.pals@nhs.net](mailto:ekh-tr.pals@nhs.net))

**Patients should not bring large sums of money or valuables into hospital.** Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property has been handed into Trust staff for safe-keeping.

**Further patient leaflets** are available via the East Kent Hospitals website (<https://www.ekhuft.nhs.uk/information-for-patients/patient-information/>).

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